

PHA Plan

Annual Plan for Fiscal Year 2001

**NOTE: THIS PHA PLAN'S TEMPLATE (HUD 50075) IS TO BE COMPLETED IN ACCORDANCE WITH
INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES**

PHA Plan Agency Identification

PHA Name: Mobile Housing Board

PHA Number: AL002

PHA Fiscal Year Beginning: (01/2001)

Public Access to Information

**Information regarding any activities outlined in this plan can be obtained by contacting:
(select all that apply)**

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices
- ☐ PHA local offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

- ☒ Main administrative office of the PHA
- ☒ PHA development management offices
- ☐ PHA local offices
- ☐ Main administrative office of the local government
- ☐ Main administrative office of the County government
- ☐ Main administrative office of the State government
- ☐ Public library
- ☐ PHA website
- ☐ Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- ☒ Main business office of the PHA
- ☐ PHA development management offices
- ☐ Other (list below)

Annual PHA Plan
PHA Fiscal Year 2001

[24 CFR Part 903.7]

i. Annual Plan Type:

Select which type of Annual Plan the PHA will submit.

☒ **Standard Plan**

Streamlined Plan:

- ☐ **High Performing PHA**
☐ **Small Agency (<250 Public Housing Units)**
☐ **Administering Section 8 Only**

☐ **Troubled Agency Plan**

ii. Annual Plan Table of Contents

[24 CFR Part 903.7 9 (r)]

Provide a table of contents for the Annual Plan, including attachments, and a list of supporting documents available for public inspection.

Table of Contents

	<u>Page #</u>
Annual Plan	
i. Table of Contents	
1. Housing Needs	4
2. Financial Resources	11
3. Policies on Eligibility, Selection and Admissions	12
4. Rent Determination Policies	21
5. Operations and Management Policies	26
6. Grievance Procedures	27
7. Capital Improvement Needs	28
8. Demolition and Disposition	30
9. Designation of Housing	31
10. Conversions of Public Housing	32
11. Homeownership	33
12. Community Service Programs	35
13. Crime and Safety	37
14. Pets	39
15. Civil Rights Certifications (included with PHA Plan Certifications)	39
16. Audit	39
17. Asset Management	40

Attachments

Indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. Note: If the attachment is provided as a SEPARATE file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

Required Attachments:

- ☒ A. Admissions Policy for Deconcentration
- ☒ B. FY 2001 Capital Fund Program Annual Statement
- ☐ Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)
- ☒ C. Public Housing Resident Community Service Requirement
- ☒ D. Progress Report
- ☒ G. Pet Policy
- ☒ E. FY 2001 Capital Fund Program 5 Year Action Plan
- ☒ F. Public Housing Drug Elimination Program (PHDEP) Plan
- ☒ H. Assessment of Site-Based Waiting List Development Demographic Changes
- ☒ I. Resident Membership of the PHA Governing Board
- ☒ J. Membership of the Resident Advisory Board /s

Optional Attachments:

- ☒ PHA Management Organizational Chart
- ☐ Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
- ☒ Other (List below, providing each attachment name)
- Fiscal Year 1999 Customer Service & Satisfaction Survey Follow-Up Plans

Supporting Documents Available for Review

Indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
X	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working	5 Year and Annual Plans

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
	with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	
X	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI)) and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the methodology for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
X	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
X	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs
X	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing
X	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
X	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
X	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
X	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
X	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
X	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)
X	- FY 1999 Customer Service & Satisfaction Survey Follow-Up Plans	Annual Plan: Optional Attachment
X	- Resident Membership of the PHA Governing Board	Annual Plan: Required Attachment

1. Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

A. Housing Needs of Families in the Jurisdiction/s Served by the PHA

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the "Overall" Needs column, provide the estimated number of renter families that have housing needs. For the remaining characteristics, rate the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being "no impact" and 5 being "severe impact." Use N/A to indicate that no information is available upon which the PHA can make this assessment.

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford- ability	Supply	Quality	Access- ibility	Size	Loca- tion
Income <= 30% of AMI	9,298	5		5		3	
Income >30% but <=50% of AMI	5,015	5		5		2	
Income >50% but <80% of AMI	4,459	3		2		2	
Elderly	4,765	3		3		2	
Families with Disabilities	1,800	3			4		
Race/Ethnicity						2	
Race/Ethnicity						3	4
Race/Ethnicity						2	
Race/Ethnicity						2	

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

- ☒ Consolidated Plan of the Jurisdiction/s
Indicate year: 1998
- ☒ U.S. Census data: the Comprehensive Housing Affordability Strategy ("CHAS") dataset
- ☐ American Housing Survey data
Indicate year:
- ☐ Other housing market study
Indicate year:
- ☐ Other sources: (list and indicate year of information)

B. Housing Needs of Families on the Public Housing and Section 8 Tenant- Based Assistance Waiting Lists

State the housing needs of the families on the PHA's waiting list/s. Complete one table for each type of PHA-wide waiting list administered by the PHA. PHAs may provide separate tables for site-based or sub-jurisdictional public housing waiting lists at their option.

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
<input type="checkbox"/>	Section 8 tenant-based assistance		
<input checked="" type="checkbox"/>	Public Housing		
<input type="checkbox"/>	Combined Section 8 and Public Housing		
<input type="checkbox"/>	Public Housing Site-Based or sub-jurisdictional waiting list (optional)		
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	1857		879
Extremely low income <=30% AMI	413	22%	
Very low income (>30% but <=50% AMI)	1404	76%	
Low income (>50% but <80% AMI)	40	2%	
Families with children	1137	61%	
Elderly families	37	2%	
Families with Disabilities	166	8.93%	
Race/ethnicity	50	2.69%	
Race/ethnicity	1801	96.98%	
Race/ethnicity	1	.05%	
Race/ethnicity	5	.26%	
Characteristics by Bedroom Size (Public Housing Only) 0BR	3	.16%	
1BR	715	38.61%	
2 BR	620	33.38%	
3 BR	431	23.20%	

Housing Needs of Families on the Waiting List			
4 BR	86	4.63%	
5 BR	2	.02%	
5+ BR			
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes: How long has it been closed (# of months)? Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Housing Needs of Families on the Waiting List			
Waiting list type: (select one) <input checked="" type="checkbox"/> Section 8 tenant-based assistance <input type="checkbox"/> Public Housing <input type="checkbox"/> Combined Section 8 and Public Housing <input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional) If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	2013		
Extremely low income <=30% AMI	1821	90%	
Very low income (>30% but <=50% AMI)	183	9%	
Low income (>50% but <80% AMI)	9	1%	
Families with children	1647	82%	
Elderly families	60	3%	
Families with Disabilities	179	8.89%	
Race/ethnicity	147	7.30%	
Race/ethnicity	1862	92.49%	
Race/ethnicity	1	.04%	
Race/ethnicity	3	.14%	

Housing Needs of Families on the Waiting List			
Characteristics by Bedroom Size (Public Housing Only)			
1BR			
2 BR			
3 BR			
4 BR			
5 BR			
5+ BR			
<p>Is the waiting list closed (select one)? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p> <p>If yes:</p> <p>How long has it been closed (# of months)? 6/30/00</p> <p>Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p> <p>Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p>			

C. Strategy for Addressing Needs

Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list IN THE UPCOMING YEAR, and the Agency's reasons for choosing this strategy.

(1) Strategies

Need: Shortage of affordable housing for all eligible populations

Strategy 1. Maximize the number of affordable units available to the PHA within its current resources by:

Select all that apply

- ☒ Employ effective maintenance and management policies to minimize the number of public housing units off-line
- ☒ Reduce turnover time for vacated public housing units
- ☒ Reduce time to renovate public housing units
- ☐ Seek replacement of public housing units lost to the inventory through mixed finance development
- ☒ Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
- ☒ Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- ☒ Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required

- ☒ Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- ☒ Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program
- ☒ Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
- ☐ Other (list below)

Strategy 2: Increase the number of affordable housing units by:

Select all that apply

- ☒ Apply for additional section 8 units should they become available
- ☒ Leverage affordable housing resources in the community through the creation of mixed - finance housing
- ☒ Pursue housing resources other than public housing or Section 8 tenant-based assistance.
- ☐ Other: (list below)

Need: Specific Family Types: Families at or below 30% of median

Strategy 1: Target available assistance to families at or below 30 % of AMI

Select all that apply

- ☐ Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing
- ☐ Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8 assistance
- ☒ Employ admissions preferences aimed at families with economic hardships
- ☒ Adopt rent policies to support and encourage work
- ☐ Other: (list below)

Need: Specific Family Types: Families at or below 50% of median

Strategy 1: Target available assistance to families at or below 50% of AMI

Select all that apply

- ☒ Employ admissions preferences aimed at families who are working
- ☒ Adopt rent policies to support and encourage work
- ☐ Other: (list below)

Need: Specific Family Types: The Elderly

Strategy 1: Target available assistance to the elderly:

Select all that apply

- ☐ Seek designation of public housing for the elderly
- ☒ Apply for special-purpose vouchers targeted to the elderly, should they become available
- ☐ Other: (list below)

Need: Specific Family Types: Families with Disabilities

Strategy 1: Target available assistance to Families with Disabilities:

Select all that apply

- ☐ Seek designation of public housing for families with disabilities
- ☒ Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
- ☒ Apply for special-purpose vouchers targeted to families with disabilities, should they become available
- ☒ Affirmatively market to local non-profit agencies that assist families with disabilities
- ☐ Other: (list below)

Need: Specific Family Types: Races or ethnicities with disproportionate housing needs

Strategy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:

Select if applicable

- ☒ Affirmatively market to races/ethnicities shown to have disproportionate housing needs
- ☐ Other: (list below)

Strategy 2: Conduct activities to affirmatively further fair housing

Select all that apply

- ☒ Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units
- ☒ Market the section 8 program to owners outside of areas of poverty /minority concentrations
- ☐ Other: (list below)

Other Housing Needs & Strategies: (list needs and strategies below)

(2) Reasons for Selecting Strategies

Of the factors listed below, select all that influenced the PHA's selection of the strategies it will pursue:

- ☒ Funding constraints
- ☒ Staffing constraints
- ☒ Limited availability of sites for assisted housing
- ☒ Extent to which particular housing needs are met by other organizations in the community
- ☒ Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA
- ☒ Influence of the housing market on PHA programs
- ☒ Community priorities regarding housing assistance
- ☒ Results of consultation with local or state government
- ☒ Results of consultation with residents and the Resident Advisory Board
- ☒ Results of consultation with advocacy groups
- ☐ Other: (list below)

2. Statement of Financial Resources

[24 CFR Part 903.7 9 (b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2001 grants)		
a) Public Housing Operating Fund	9,000,000	
b) Public Housing Capital Fund	7,851,000	
c) HOPE VI Revitalization		
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance	10,500,000	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	900,000	
g) Resident Opportunity and Self- Sufficiency Grants		

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
h) Community Development Block Grant	3,800,000	Policing, recreational and supportive services, affordable housing and rehabilitation
i) HOME	1,555,000	Affordable Housing and rehabilitation, rental assistance
Other Federal Grants (list below)		
a) Homeless Shelter	120,000	Aid to homeless
b) Housing Counseling	9,000	Aid to homeowners and buyers
c) Family Self-Sufficiency	35,000	
2. Prior Year Federal Grants (unobligated funds only) (list below)		
a) Emergency Supplemental Funds	679,777	Flood restoration
b) HOPE VI Elderly	4,000,000	CPT Assisted Housing
c) HOPE VI Demolition	642,000	144 Units AL 2-8
d) Comprehensive Grant	12,000,000	Modernization
3. Public Housing Dwelling Rental Income	4,400,000	Public Housing Programs
4. Other Income (list below)		
Affordable Homes Proceeds	500,000	Housing construction
Interest and Misc. Income PH, S8, & CDBG/HOME	800,000	Operating budgets
4. Non-federal sources (list below)		
a) Governors Youth Grant	5,000	Anti-drug programs
b) ADECA - Emergency	250,000	Aid Homeless
c) Donations (City Match)	400,000	Self sufficiency and home rehab
d) Alabama Dept of Public Health	18,000	Homemaker Service
Total resources	*57,464,777	
	*Excludes Reserves	

3. PHA Policies Governing Eligibility, Selection, and Admissions

[24 CFR Part 903.7 9 (c)]

A. Public Housing

Exemptions: PHAs that do not administer public housing are not required to complete subcomponent 3A.

(1) Eligibility

a. When does the PHA verify eligibility for admission to public housing? (select all that apply)

- ☒ When families are within a certain number of being offered a unit: (state number) 30
☐ When families are within a certain time of being offered a unit: (state time)
☐ Other: (describe)

b. Which non-income (screening) factors does the PHA use to establish eligibility for admission to public housing (select all that apply)?

- ☒ Criminal or Drug-related activity
☒ Rental history
☒ Housekeeping
☐ Other (describe)

c. ☒ Yes ☐ No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?

d. ☒ Yes ☐ No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?

e. ☒ Yes ☐ No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)

(2)Waiting List Organization

a. Which methods does the PHA plan to use to organize its public housing waiting list (select all that apply)

- ☐ Community-wide list
☐ Sub-jurisdictional lists
☒ Site-based waiting lists
☐ Other (describe)

b. Where may interested persons apply for admission to public housing?

- ☐ PHA main administrative office
☒ PHA development site management office
☒ Other (list below)
Leasing and Marketing Office at 1517 Plaza Drive

c. If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to subsection **(3) Assignment**

1. How many site-based waiting lists will the PHA operate in the coming year? 10
2. ☒ Yes ☐ No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?
If yes, how many lists? 10
3. ☒ Yes ☐ No: May families be on more than one list simultaneously
If yes, how many lists? 10
4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?
- ☐ PHA main administrative office
 - ☒ All PHA development management offices
 - ☒ Management offices at developments with site-based waiting lists
 - ☒ At the development to which they would like to apply
 - ☒ Other (list below)
Leasing and Marketing Office at 1517 Plaza Drive, Mobile, AL 36605

(3) Assignment

- a. How many vacant unit choices are applicants ordinarily given before they fall to the bottom of or are removed from the waiting list? (select one)
- ☐ One
 - ☒ Two
 - ☐ Three or More
- b. ☒ Yes ☐ No: Is this policy consistent across all waiting list types?
- c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA:

(4) Admissions Preferences

- a. Income targeting:
- ☐ Yes ☒ No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?
- b. Transfer policies:
- In what circumstances will transfers take precedence over new admissions? (list below)
- ☒ Emergencies
 - ☐ Overhoused

- ☐ Underhoused
- ☒ Medical justification
- ☒ Administrative reasons determined by the PHA (e.g., to permit modernization work)
- ☐ Resident choice: (state circumstances below)
- ☐ Other: (list below)

c. Preferences

1. ☒ Yes ☐ No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If “no” is selected, skip to subsection **(5) Occupancy**)
2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences:

- ☒ Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- ☐ Victims of domestic violence
- ☒ Substandard housing
- ☒ Homelessness
- ☐ High rent burden (rent is > 50 percent of income)

Other preferences: (select below)

- ☒ Working families and those unable to work because of age or disability
- ☐ Veterans and veterans’ families
- ☒ Residents who live and/or work in the jurisdiction
- ☒ Those enrolled currently in educational, training, or upward mobility programs
- ☐ Households that contribute to meeting income goals (broad range of incomes)
- ☐ Households that contribute to meeting income requirements (targeting)
- ☒ Those previously enrolled in educational, training, or upward mobility programs
- ☐ Victims of reprisals or hate crimes
- ☒ Other preference(s) (list below)
Elderly or disabled person or family

3. If the PHA will employ admissions preferences, please prioritize by placing a “1” in the space that represents your first priority, a “2” in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use “1” more than once, “2” more than once, etc.

Date and Time

Former Federal preferences:

- 2 Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
Victims of domestic violence
- 3 Substandard housing
- 1 Homelessness
High rent burden

Other preferences (select all that apply)

- ☒ Working families and those unable to work because of age or disability
- ☐ Veterans and veterans' families
- ☒ Residents who live and/or work in the jurisdiction
- ☒ Those enrolled currently in educational, training, or upward mobility programs
- ☐ Households that contribute to meeting income goals (broad range of incomes)
- ☒ Households that contribute to meeting income requirements (targeting)
- ☐ Those previously enrolled in educational, training, or upward mobility programs
- ☐ Victims of reprisals or hate crimes
- ☒ Other preference(s) (list below)
Elderly or disabled person or family

4. Relationship of preferences to income targeting requirements:

- ☐ The PHA applies preferences within income tiers
- ☒ Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

(5) Occupancy

a. What reference materials can applicants and residents use to obtain information about the rules of occupancy of public housing (select all that apply)

- ☒ The PHA-resident lease
- ☒ The PHA's Admissions and (Continued) Occupancy policy
- ☒ PHA briefing seminars or written materials
- ☐ Other source (list)

b. How often must residents notify the PHA of changes in family composition? (select all that apply)

- ☒ At an annual reexamination and lease renewal
- ☒ Any time family composition changes
- ☒ At family request for revision
- ☐ Other (list)

(6) Deconcentration and Income Mixing

Refer to Attachment A

a. ☐ Yes ☒ No: Did the PHA's analysis of its family (general occupancy) developments to determine concentrations of poverty indicate the need for measures to promote deconcentration of poverty or income mixing?

b. ☐ Yes ☒ No: Did the PHA adopt any changes to its **admissions policies** based on the results of the required analysis of the need to promote deconcentration of poverty or to assure income mixing?

c. If the answer to b was yes, what changes were adopted? (select all that apply)

☐ Employing waiting list "skipping" to achieve deconcentration of poverty or income mixing goals at targeted developments

If selected, list targeted developments below:

AL002 et al (2-01, 2-02, 2-03, 2-04, 2-05, 2-06, 2-08, 2-09, 2-10, 2-11, 2-12, 2-13, 2-14, 2-15, 2-16, and 2-17.

☐ Employing new admission preferences at targeted developments

If selected, list targeted developments below:

☐ Other (list policies and developments targeted below)

Priority for working families

d. ☐ Yes ☒ No: Did the PHA adopt any changes to **other** policies based on the results of the required analysis of the need for deconcentration of poverty and income mixing?

e. If the answer to d was yes, how would you describe these changes? (select all that apply)

☐ Additional affirmative marketing

☐ Actions to improve the marketability of certain developments

☐ Adoption or adjustment of ceiling rents for certain developments

☐ Adoption of rent incentives to encourage deconcentration of poverty and income-mixing

☐ Other (list below)

f. Based on the results of the required analysis, in which developments will the PHA make special efforts to attract or retain higher-income families? (select all that apply)

☒ Not applicable: results of analysis did not indicate a need for such efforts

☐ List (any applicable) developments below:

g. Based on the results of the required analysis, in which developments will the PHA make special efforts to assure access for lower-income families? (select all that apply)

- ☒ Not applicable: results of analysis did not indicate a need for such efforts
☐ List (any applicable) developments below:

B. Section 8

Exemptions: PHAs that do not administer section 8 are not required to complete sub-component 3B. Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).

(1) Eligibility

a. What is the extent of screening conducted by the PHA? (select all that apply)

- ☒ Criminal or drug-related activity only to the extent required by law or regulation
☐ Criminal and drug-related activity, more extensively than required by law or regulation
☒ More general screening than criminal and drug-related activity (list factors below)
Rent Payment, Tenant History, Housekeeping
☐ Other (list below)

b. ☒ Yes ☐ No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?

c. ☒ Yes ☐ No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?

d. ☒ Yes ☐ No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)

e. Indicate what kinds of information you share with prospective landlords? (select all that apply)

- ☒ Criminal or drug-related activity
☒ Other (describe below)
Derogatory information based on past residence

(2) Waiting List Organization

a. With which of the following program waiting lists is the section 8 tenant-based assistance waiting list merged? (select all that apply)

- ☐ None
☐ Federal public housing
☒ Federal moderate rehabilitation
☐ Federal project-based certificate program

- ☒ Other federal or local program (list below)
Tenant-Based Rental Assistance (HOME Program)

b. Where may interested persons apply for admission to section 8 tenant-based assistance?
(select all that apply)

- ☐ PHA main administrative office
☒ Other (list below)
Leasing and Marketing Office – 1517 Plaza Drive, Mobile, AL 36605

(3) Search Time

- a. ☒ Yes ☐ No: Does the PHA give extensions on standard 60-day period to search for a unit?

If yes, state circumstances below:

Applicant exhausted reasonable effort to locate housing but not able to due to market conditions

(4) Admissions Preferences

a. Income targeting

- ☐ Yes ☒ No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income?

b. Preferences

1. ☒ Yes ☐ No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent **(5) Special purpose section 8 assistance programs**)

2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences

- ☒ Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
☐ Victims of domestic violence
☒ Substandard housing
☒ Homelessness

☐ High rent burden (rent is > 50 percent of income)

Other preferences (select all that apply)

- ☒ Working families and those unable to work because of age or disability
- ☐ Veterans and veterans' families
- ☒ Residents who live and/or work in your jurisdiction
- ☒ Those enrolled currently in educational, training, or upward mobility programs
- ☐ Households that contribute to meeting income goals (broad range of incomes)
- ☐ Households that contribute to meeting income requirements (targeting)
- ☒ Those previously enrolled in educational, training, or upward mobility programs
- ☐ Victims of reprisals or hate crimes
- ☐ Other preference(s) (list below)

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

Date and Time

Former Federal preferences

- 2 Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
Victims of domestic violence
- 3 Substandard housing
- 1 Homelessness
High rent burden

Other preferences (select all that apply)

- ☒ Working families and those unable to work because of age or disability
- ☐ Veterans and veterans' families
- ☒ Residents who live and/or work in your jurisdiction
- ☒ Those enrolled currently in educational, training, or upward mobility programs
- ☐ Households that contribute to meeting income goals (broad range of incomes)
- ☐ Households that contribute to meeting income requirements (targeting)
- ☒ Those previously enrolled in educational, training, or upward mobility programs
- ☐ Victims of reprisals or hate crimes
- ☐ Other preference(s) (list below)

4. Among applicants on the waiting list with equal preference status, how are applicants selected? (select one)

- ☒ Date and time of application
☐ Drawing (lottery) or other random choice technique

5. If the PHA plans to employ preferences for “residents who live and/or work in the jurisdiction” (select one)

- ☒ This preference has previously been reviewed and approved by HUD
☐ The PHA requests approval for this preference through this PHA Plan

6. Relationship of preferences to income targeting requirements: (select one)

- ☐ The PHA applies preferences within income tiers
☒ Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

(5) Special Purpose Section 8 Assistance Programs

a. In which documents or other reference materials are the policies governing eligibility, selection, and admissions to any special-purpose section 8 program administered by the PHA contained? (select all that apply)

- ☒ The Section 8 Administrative Plan
☒ Briefing sessions and written materials
☐ Other (list below)

b. How does the PHA announce the availability of any special-purpose section 8 programs to the public?

- ☒ Through published notices
☐ Other (list below)

4. PHA Rent Determination Policies

[24 CFR Part 903.79(d)]

A. Public Housing

Exemptions: PHAs that do not administer public housing are not required to complete sub-component 4A.

(1) Income Based Rent Policies

Describe the PHA’s income based rent setting policy/ies for public housing using, including discretionary (that is, not required by statute or regulation) income disregards and exclusions, in the appropriate spaces below.

a. Use of discretionary policies: (select one)

- ☒ The PHA will not employ any discretionary rent-setting policies for income based rent in public housing. Income-based rents are set at the higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub-component (2))

---or---

- ☐ The PHA employs discretionary policies for determining income based rent (If selected, continue to question b.)

b. Minimum Rent

1. What amount best reflects the PHA's minimum rent? (select one)

- ☐ \$0
☒ \$1-\$25
☐ \$26-\$50

2. ☒ Yes ☐ No: Has the PHA adopted any discretionary minimum rent hardship exemption policies?

(1) If yes to question 2, list these policies below:

The HA shall immediately grant an exemption from application of the minimum monthly rent to any family making a proper request in writing who is unable to pay because of financial hardship, which shall include:

- The family has lost eligibility for, or is awaiting an eligibility determination from a federal, state or local assistance program, including a family that includes a member who is an alien lawfully admitted for permanent residence under the immigration and nationalization act who would be entitled to public benefits but for Title IV of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996.
- The family would be evicted as a result of the implementation of the minimum rent (this exemption is only applicable for the initial implementation of a minimum rent or increase to the existing minimum rent).
- The income of the family has decreased because of changed circumstances, including loss of employment.
- A death in the family has occurred which affects the family circumstances, including loss of employment.

- Other circumstances which may be decided by the HA on a case-by-case basis.

All the above must be proven by the Resident providing a verifiable information in writing to the HA prior to the rent becoming delinquent and before the lease is terminated by the HA.

If a resident requests a hardship exemption (**prior to the rent being delinquent**) under this section, and the HA reasonably determines the hardship to be of a temporary nature, exemption shall not be granted during a ninety-day period beginning upon the making of the request for the exemption. A resident may not be evicted during the ninety-day period for non-payment of rent. In such a case, if the resident thereafter demonstrates that the financial hardship is of a long-term basis, the HA shall retroactively exempt the resident from the applicability of the minimum rent requirement for such ninety-day period. This Paragraph does not prohibit the HA from taking eviction action for other violations of the lease.

c. Rents set at less than 30% than adjusted income

1. ☐ Yes ☒ No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?
2. If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below:

d. Which of the discretionary (optional) deductions and/or exclusions policies does the PHA plan to employ (select all that apply)

- ☐ For the earned income of a previously unemployed household member
- ☐ For increases in earned income
- ☐ Fixed amount (other than general rent-setting policy)

If yes, state amount/s and circumstances below:

- ☐ Fixed percentage (other than general rent-setting policy)
- If yes, state percentage/s and circumstances below:

- ☐ For household heads
- ☐ For other family members
- ☐ For transportation expenses
- ☐ For the non-reimbursed medical expenses of non-disabled or non-elderly families
- ☐ Other (describe below)

e. Ceiling rents

1. Do you have ceiling rents? (rents set at a level lower than 30% of adjusted income)
(select one)

- ☒ Yes for all developments
☐ Yes but only for some developments
☐ No

2. For which kinds of developments are ceiling rents in place? (select all that apply)

- ☒ For all developments
☐ For all general occupancy developments (not elderly or disabled or elderly only)
☐ For specified general occupancy developments
☐ For certain parts of developments; e.g., the high-rise portion
☐ For certain size units; e.g., larger bedroom sizes
☐ Other (list below)

3. Select the space or spaces that best describe how you arrive at ceiling rents (select all that apply)

- ☐ Market comparability study
☐ Fair market rents (FMR)
☒ 95th percentile rents
☐ 75 percent of operating costs
☐ 100 percent of operating costs for general occupancy (family) developments
☐ Operating costs plus debt service
☐ The "rental value" of the unit
☐ Other (list below)

f. Rent re-determinations:

1. Between income reexaminations, how often must tenants report changes in income or family composition to the PHA such that the changes result in an adjustment to rent? (select all that apply)

- ☐ Never
☐ At family option
☐ Any time the family experiences an income increase
☐ Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold)_____

- ☒ Other (list below)
Within 30 calendar days of change

g. ☐ Yes ☒ No: Does the PHA plan to implement individual savings accounts for residents (ISAs) as an alternative to the required 12 month disallowance of earned income and phasing in of rent increases in the next year?

(2) Flat Rents

1. In setting the market-based flat rents, what sources of information did the PHA use to establish comparability? (select all that apply.)

- ☒ The section 8 rent reasonableness study of comparable housing
☐ Survey of rents listed in local newspaper
☐ Survey of similar unassisted units in the neighborhood
☐ Other (list/describe below)

B. Section 8 Tenant-Based Assistance

Exemptions: PHAs that do not administer Section 8 tenant-based assistance are not required to complete sub-component 4B. Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).

(1) Payment Standards

Describe the voucher payment standards and policies.

a. What is the PHA's payment standard? (select the category that best describes your standard)

- ☐ At or above 90% but below 100% of FMR
☒ 100% of FMR
☐ Above 100% but at or below 110% of FMR
☐ Above 110% of FMR (if HUD approved; describe circumstances below)

b. If the payment standard is lower than FMR, why has the PHA selected this standard? (select all that apply)

- ☒ FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area
☐ The PHA has chosen to serve additional families by lowering the payment standard
☐ Reflects market or submarket
☐ Other (list below)

c. If the payment standard is higher than FMR, why has the PHA chosen this level? (select all that apply)

- ☐ FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area
- ☐ Reflects market or submarket
- ☐ To increase housing options for families
- ☐ Other (list below)

d. How often are payment standards reevaluated for adequacy? (select one)

- ☒ Annually
- ☐ Other (list below)

e. What factors will the PHA consider in its assessment of the adequacy of its payment standard? (select all that apply)

- ☒ Success rates of assisted families
- ☒ Rent burdens of assisted families
- ☐ Other (list below)

(2) Minimum Rent

a. What amount best reflects the PHA's minimum rent? (select one)

- ☐ \$0
- ☒ \$1-\$25
- ☐ \$26-\$50

b. ☒ Yes ☐ No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)

The HA shall immediately grant an exemption from application of the minimum monthly rent to any family making a proper request in writing who is unable to pay because of financial hardship, which shall include:

- The family has lost eligibility for, or is awaiting an eligibility determination from a federal, state or local assistance program, including a family that includes a member who is an alien lawfully admitted for permanent residence under the immigration and nationalization act who would be entitled to public benefits but for Title IV of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996.

- The family would be evicted as a result of the implementation of the minimum rent (this exemption is only applicable for the initial implementation of a minimum rent or increase to the existing minimum rent).
- The income of the family has decreased because of changed circumstances, including loss of employment.
- A death in the family has occurred which affects the family circumstances, including loss of employment.
- Other circumstances which may be decided by the HA on a case-by-case basis.

All the above must be proven by the Resident providing a verifiable information in writing to the HA prior to the rent becoming delinquent and before the lease is terminated by the HA.

If a resident requests a hardship exemption (**prior to the rent being delinquent**) under this section, and the HA reasonably determines the hardship to be of a temporary nature, exemption shall not be granted during a ninety-day period beginning upon the making of the request for the exemption. A resident may not be evicted during the ninety-day period for non-payment of rent. In such a case, if the resident thereafter demonstrates that the financial hardship is of a long-term basis, the HA shall retroactively exempt the resident from the applicability of the minimum rent requirement for such ninety-day period. This Paragraph does not prohibit the HA from taking eviction action for other violations of the lease.

5. Operations and Management

[24 CFR Part 903.7 9 (e)]

Exemptions from Component 5: High performing and small PHAs are not required to complete this section. Section 8 only PHAs must complete parts A, B, and C(2)

A. PHA Management Structure

Describe the PHA's management structure and organization.

(select one)

- ☒ An organization chart showing the PHA's management structure and organization is attached.
- ☐ A brief description of the management structure and organization of the PHA follows:

B. HUD Programs Under PHA Management

- List Federal programs administered by the PHA, number of families served at the beginning of the upcoming fiscal year, and expected turnover in each. (Use “NA” to indicate that the PHA does not operate any of the programs listed below.)

Program Name	Units or Families Served at Year Beginning	Expected Turnover
Public Housing	4062	882
Section 8 Vouchers	2442	324
Section 8 Certificates	60	15
Section 8 Mod Rehab	37	10
Special Purpose Section 8 Certificates/Vouchers (list individually)	100 disabled vouchers	24
Public Housing Drug Elimination Program (PHDEP)	4062	
Section 5H	38	38
Other Federal Programs(list individually)	New Construction 482	72
EDSS	4062	
Home Rental Assistance	75	24

C. Management and Maintenance Policies

List the PHA’s public housing management and maintenance policy documents, manuals and handbooks that contain the Agency’s rules, standards, and policies that govern maintenance and management of public housing, including a description of any measures necessary for the prevention or eradication of pest infestation (which includes cockroach infestation) and the policies governing Section 8 management.

- (1) Public Housing Maintenance and Management: (list below)
ACOP
Mobile Housing Board Policy and Procedures Manual
- (2) Section 8 Management: (list below)
Section 8 Administrative Plan

6. PHA Grievance Procedures

[24 CFR Part 903.7 9 (f)]

Exemptions from component 6: High performing PHAs are not required to complete component 6. Section 8-Only PHAs are exempt from sub-component 6A.

A. Public Housing

1. ☐ Yes ☒ No: Has the PHA established any written grievance procedures in addition to federal requirements found at 24 CFR Part 966, Subpart B, for residents of public housing?

If yes, list additions to federal requirements below:

2. Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)

- ☐ PHA main administrative office
☒ PHA development management offices

- ☒ Other (list below)

Leasing and Marketing Office, 1517 Plaza Drive, Mobile, Alabama 36605

B. Section 8 Tenant-Based Assistance

1. ☐ Yes ☒ No: Has the PHA established informal review procedures for applicants to the Section 8 tenant-based assistance program and informal hearing procedures for families assisted by the Section 8 tenant-based assistance program in addition to federal requirements found at 24 CFR 982?

If yes, list additions to federal requirements below:

2. Which PHA office should applicants or assisted families contact to initiate the informal review and informal hearing processes? (select all that apply)

- ☐ PHA main administrative office
☒ Other (list below)

Section 8 Program Office, 1517 Plaza Drive, Mobile, Alabama 36605

7. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

Exemptions from Component 7: Section 8 only PHAs are not required to complete this component and may skip to Component 8.

A. Capital Fund Activities

Exemptions from sub-component 7A: PHAs that will not participate in the Capital Fund Program may skip to component 7B. All other PHAs must complete 7A as instructed.

(1) Capital Fund Program Annual Statement

Using parts I, II, and III of the Annual Statement for the Capital Fund Program (CFP), identify capital activities the PHA is proposing for the upcoming year to ensure long-term physical and social viability of its public housing developments. This statement can be completed by using the CFP Annual Statement tables provided in the table library at the end of the PHA Plan template OR, at the PHA's option, by completing and attaching a properly updated HUD-52837.

Select one:

☒ The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (state name) Attachment B

-or-

☐ The Capital Fund Program Annual Statement is provided below: (if selected, copy the CFP Annual Statement from the Table Library and insert here)

(2) Optional 5-Year Action Plan

Agencies are encouraged to include a 5-Year Action Plan covering capital work items. This statement can be completed by using the 5 Year Action Plan table provided in the table library at the end of the PHA Plan template OR by completing and attaching a properly updated HUD-52834.

a. ☒ Yes ☐ No: Is the PHA providing an optional 5-Year Action Plan for the Capital Fund? (if no, skip to sub-component 7B)

b. If yes to question a, select one:

☒ The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at Attachment (state name) Attachment F

-or-

☐ The Capital Fund Program 5-Year Action Plan is provided below: (if selected, copy the CFP optional 5 Year Action Plan from the Table Library and insert here)

B. HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund)

Applicability of sub-component 7B: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement.

☒ Yes ☐ No: a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary)
b) Status of HOPE VI revitalization grant (complete one set of questions for each grant)

1. Development name: Central Plaza Towers

2. Development (project) number: AL 9002012 and AL9002015
3. Status of grant: (select the statement that best describes the current status)

- ☒ Revitalization Plan under development
☐ Revitalization Plan submitted, pending approval
☐ Revitalization Plan approved
☐ Activities pursuant to an approved Revitalization Plan underway

- ☒ Yes ☐ No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?

If yes, list development name/s below:

AL 9002003 – Roger Williams

AL9002004 and AL9002009 – A. F. Owens and Jessie Thomas respectively

- ☐ Yes ☒ No: d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year?

If yes, list developments or activities below:

- ☐ Yes ☒ No: e) Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement?

If yes, list developments or activities below:

8. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

Applicability of component 8: Section 8 only PHAs are not required to complete this section.

1. ☒ Yes ☐ No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If “No”, skip to component 9; if “yes”, complete one activity description for each development.)

2. Activity Description

- ☐ Yes ☒ No: Has the PHA provided the activities description information in the **optional** Public Housing Asset Management Table? (If “yes”, skip to component 9. If “No”, complete the Activity Description table below.)

Demolition/Disposition Activity Description
--

1a. Development name: Josephine Allen Homes
1b. Development (project) number: AL 2-8
2. Activity type: Demolition <input checked="" type="checkbox"/> Disposition <input type="checkbox"/>
3. Application status (select one) Approved <input checked="" type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date application approved, submitted, or planned for submission: <u>02/05/99</u>
5. Number of units affected: 144
6. Coverage of action (select one) <input checked="" type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Timeline for activity: a. Actual or projected start date of activity: 01/02/2001 b. Projected end date of activity: 06/01/2001

9. Designation of Public Housing for Occupancy by Elderly Families or Families with Disabilities or Elderly Families and Families with Disabilities

[24 CFR Part 903.7 9 (i)]

Exemptions from Component 9; Section 8 only PHAs are not required to complete this section.

1. ☐ Yes ☒ No: Has the PHA designated or applied for approval to designate or does the PHA plan to apply to designate any public housing for occupancy only by the elderly families or only by families with disabilities, or by elderly families and families with disabilities or will apply for designation for occupancy by only elderly families or only families with disabilities, or by elderly families and families with disabilities as provided by section 7 of the U.S. Housing Act of 1937 (42 U.S.C. 1437e) in the upcoming fiscal year? (If “No”, skip to component 10. If “yes”, complete one activity description for each development, unless the PHA is eligible to complete a streamlined submission; PHAs completing streamlined submissions may skip to component 10.)

2. Activity Description

- ☐ Yes ☐ No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If “yes”, skip to component 10. If “No”, complete the Activity Description table below.

Designation of Public Housing Activity Description
1a. Development name: 1b. Development (project) number:
2. Designation type: Occupancy by only the elderly <input type="checkbox"/> Occupancy by families with disabilities <input type="checkbox"/> Occupancy by only elderly families and families with disabilities <input type="checkbox"/>
3. Application status (select one) Approved; included in the PHA’s Designation Plan <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date this designation approved, submitted, or planned for submission:
5. If approved, will this designation constitute a (select one) <input type="checkbox"/> New Designation Plan <input type="checkbox"/> Revision of a previously-approved Designation Plan?
6. Number of units affected: 7. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development

10. Conversion of Public Housing to Tenant-Based Assistance

[24 CFR Part 903.7 9 (j)]

Exemptions from Component 10; Section 8 only PHAs are not required to complete this section.

A. Assessments of Reasonable Revitalization Pursuant to section 202 of the HUD FY 1996 HUD Appropriations Act

1. ☐ Yes ☒ No: Have any of the PHA’s developments or portions of developments been identified by HUD or the PHA as covered under section 202 of the HUD FY 1996 HUD Appropriations Act? (If “No”, skip to component 11; if “yes”, complete one activity description for each identified development, unless eligible to complete a streamlined submission. PHAs completing streamlined submissions may skip to component 11.)

2. Activity Description

☐ Yes ☐ No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If “yes”, skip to component 11. If “No”, complete the Activity Description table below.

Conversion of Public Housing Activity Description	
1a. Development name:	
1b. Development (project) number:	
2. What is the status of the required assessment?	<input type="checkbox"/> Assessment underway <input type="checkbox"/> Assessment results submitted to HUD <input type="checkbox"/> Assessment results approved by HUD (if marked, proceed to next question) <input type="checkbox"/> Other (explain below)
3. <input type="checkbox"/> Yes <input type="checkbox"/> No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)	
4. Status of Conversion Plan (select the statement that best describes the current status)	<input type="checkbox"/> Conversion Plan in development <input type="checkbox"/> Conversion Plan submitted to HUD on: (DD/MM/YYYY) <input type="checkbox"/> Conversion Plan approved by HUD on: (DD/MM/YYYY) <input type="checkbox"/> Activities pursuant to HUD-approved Conversion Plan underway
5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one)	<input type="checkbox"/> Units addressed in a pending or approved demolition application (date submitted or approved: _____) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved: _____) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved: _____) <input type="checkbox"/> Requirements no longer applicable: vacancy rates are less than 10 percent <input type="checkbox"/> Requirements no longer applicable: site now has less than 300 units <input type="checkbox"/> Other: (describe below)

B. Reserved for Conversions pursuant to Section 22 of the U.S. Housing Act of 1937

C. Reserved for Conversions pursuant to Section 33 of the U.S. Housing Act of 1937

11. Homeownership Programs Administered by the PHA

[24 CFR Part 903.7 9 (k)]

A. Public Housing

Exemptions from Component 11A: Section 8 only PHAs are not required to complete 11A.

1. ☒ Yes ☐ No: Does the PHA administer any homeownership programs administered by the PHA under an approved section 5(h) homeownership program (42 U.S.C. 1437c(h)), or an approved HOPE I program (42 U.S.C. 1437aaa) or has the PHA applied or plan to apply to administer any homeownership programs under section 5(h), the HOPE I program, or section 32 of the U.S. Housing Act of 1937 (42 U.S.C. 1437z-4). (If “No”, skip to component 11B; if “yes”, complete one activity description for each applicable program/plan, unless eligible to complete a streamlined submission due to **small PHA** or **high performing PHA** status. PHAs completing streamlined submissions may skip to component 11B.)

2. Activity Description

- ☐ Yes ☒ No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? (If “yes”, skip to component 12. If “No”, complete the Activity Description table below.)

Public Housing Homeownership Activity Description (Complete one for each development affected)
1a. Development name: 1b. Development (project) number: AL09P002018
2. Federal Program authority: <input type="checkbox"/> HOPE I <input checked="" type="checkbox"/> 5(h) <input type="checkbox"/> Turnkey III <input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)
3. Application status: (select one) <input type="checkbox"/> Approved; included in the PHA’s Homeownership Plan/Program <input type="checkbox"/> Submitted, pending approval <input checked="" type="checkbox"/> Planned application
4. Date Homeownership Plan/Program approved, submitted, or planned for submission: (12/31/00)
5. Number of units affected: 38
6. Coverage of action: (select one)

- | |
|---|
| <input checked="" type="checkbox"/> Part of the development |
| <input type="checkbox"/> Total development |

B. Section 8 Tenant Based Assistance

1. ☐ Yes ☒ No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If "No", skip to component 12; if "yes", describe each program using the table below (copy and complete questions for each program identified), unless the PHA is eligible to complete a streamlined submission due to high performer status. **High performing PHAs** may skip to component 12.)

2. Program Description:

a. Size of Program

- ☐ Yes ☐ No: Will the PHA limit the number of families participating in the section 8 homeownership option?

If the answer to the question above was yes, which statement best describes the number of participants? (select one)

- ☐ 25 or fewer participants
☐ 26 - 50 participants
☐ 51 to 100 participants
☐ more than 100 participants

b. PHA-established eligibility criteria

- ☐ Yes ☐ No: Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria?
If yes, list criteria below:

12. PHA Community Service and Self-sufficiency Programs

[24 CFR Part 903.7 9 (l)]

Exemptions from Component 12: High performing and small PHAs are not required to complete this component. Section 8-Only PHAs are not required to complete sub-component C.

A. PHA Coordination with the Welfare (TANF) Agency

1. Cooperative agreements:

- ☒ Yes ☐ No: Has the PHA has entered into a cooperative agreement with the TANF Agency, to share information and/or target supportive services (as contemplated by section 12(d)(7) of the Housing Act of 1937)?

If yes, what was the date that agreement was signed? 12/20/1991

2. Other coordination efforts between the PHA and TANF agency (select all that apply)

- ☒ Client referrals
- ☒ Information sharing regarding mutual clients (for rent determinations and otherwise)
- ☒ Coordinate the provision of specific social and self-sufficiency services and programs to eligible families
- ☒ Jointly administer programs
- ☒ Partner to administer a HUD Welfare-to-Work voucher program
- ☐ Joint administration of other demonstration program
- ☐ Other (describe)

B. Services and programs offered to residents and participants

(1) General

a. Self-Sufficiency Policies

Which, if any of the following discretionary policies will the PHA employ to enhance the economic and social self-sufficiency of assisted families in the following areas?

(select all that apply)

- ☒ Public housing rent determination policies
- ☒ Public housing admissions policies
- ☒ Section 8 admissions policies
- ☐ Preference in admission to section 8 for certain public housing families
- ☒ Preferences for families working or engaging in training or education programs for non-housing programs operated or coordinated by the PHA
- ☒ Preference/eligibility for public housing homeownership option participation
- ☒ Preference/eligibility for section 8 homeownership option participation
- ☐ Other policies (list below)

b. Economic and Social self-sufficiency programs

- ☒ Yes ☐ No: Does the PHA coordinate, promote or provide any programs to enhance the economic and social self-sufficiency of residents? (If “yes”, complete the following table; if “no” skip to sub-component 2, Family Self Sufficiency Programs. The position of the table may be altered to facilitate its use.)

Services and Programs				
Program Name & Description	Estimated	Allocation	Access	Eligibility

(including location, if appropriate)	Size	Method (waiting list/random selection/specific criteria/other)	(development office / PHA main office / other provider name)	(public housing or section 8 participants or both)
Wheels To Work (Car sales)	20	Specific Criteria	Development Office	Both
Scholarship Program	12	Specific Criteria	Development Office	Both
FSS Program	326	Specific Criteria	Development Office	Both
Economic Development Center	100	Specific Criteria	Development Office	Both
Preparation to Employment	15	Specific Criteria	Development Office	Both

(2) Family Self Sufficiency program/s

a. Participation Description

Family Self Sufficiency (FSS) Participation		
Program	Required Number of Participants (start of FY 2000 Estimate)	Actual Number of Participants (As of: DD/MM/YY)
Public Housing	65	65 (9/11/00)
Section 8	261	97 (9/11/00)

- b. ☒ Yes ☐ No: If the PHA is not maintaining the minimum program size required by HUD, does the most recent FSS Action Plan address the steps the PHA plans to take to achieve at least the minimum program size?
If no, list steps the PHA will take below:

C. Welfare Benefit Reductions

1. The PHA is complying with the statutory requirements of section 12(d) of the U.S. Housing Act of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by: (select all that apply)

- ☒ Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies
- ☒ Informing residents of new policy on admission and reexamination
- ☒ Actively notifying residents of new policy at times in addition to admission and reexamination.
- ☒ Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
- ☒ Establishing a protocol for exchange of information with all appropriate TANF agencies
- ☐ Other: (list below)

D. Reserved for Community Service Requirement pursuant to section 12(c) of the U.S. Housing Act of 1937

Refer to Policy Draft in Attachment C

13. PHA Safety and Crime Prevention Measures

[24 CFR Part 903.7 9 (m)]

Exemptions from Component 13: High performing and small PHAs not participating in PHDEP and Section 8 Only PHAs may skip to component 15. High Performing and small PHAs that are participating in PHDEP and are submitting a PHDEP Plan with this PHA Plan may skip to sub-component D.

A. Need for measures to ensure the safety of public housing residents

1. Describe the need for measures to ensure the safety of public housing residents (select all that apply)

- ☒ High incidence of violent and/or drug-related crime in some or all of the PHA's developments
- ☒ High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to the PHA's developments
- ☒ Residents fearful for their safety and/or the safety of their children
- ☒ Observed lower-level crime, vandalism and/or graffiti
- ☒ People on waiting list unwilling to move into one or more developments due to perceived and/or actual levels of violent and/or drug-related crime
- ☐ Other (describe below)

2. What information or data did the PHA used to determine the need for PHA actions to improve safety of residents (select all that apply).

- ☒ Safety and security survey of residents
- ☒ Analysis of crime statistics over time for crimes committed "in and around" public housing authority
- ☐ Analysis of cost trends over time for repair of vandalism and removal of graffiti
- ☒ Resident reports
- ☒ PHA employee reports
- ☒ Police reports
- ☒ Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs
- ☐ Other (describe below)

1. Which developments are most affected? (list below)

Oaklawn, Gulf Village, R.V. Taylor, Jessie Thomas, Orange Grove,

Albert Owens, Josephine Allen, Roger Williams, Thomas James

B. Crime and Drug Prevention activities the PHA has undertaken or plans to undertake in the next PHA fiscal year

1. List the crime prevention activities the PHA has undertaken or plans to undertake: (select all that apply)

- ☒ Contracting with outside and/or resident organizations for the provision of crime- and/or drug-prevention activities
- ☒ Crime Prevention Through Environmental Design
- ☒ Activities targeted to at-risk youth, adults, or seniors
- ☒ Volunteer Resident Patrol/Block Watchers Program
- ☐ Other (describe below)

2. Which developments are most affected? (list below)

Oaklawn, Gulf Village, R.V. Taylor, Jessie Thomas, Orange Grove,
Albert Owens, Josephine Allen, Roger Williams, Thomas James

C. Coordination between PHA and the police

1. Describe the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities: (select all that apply)

- ☒ Police involvement in development, implementation, and/or ongoing evaluation of drug-elimination plan
- ☒ Police provide crime data to housing authority staff for analysis and action
- ☒ Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence)
- ☒ Police regularly testify in and otherwise support eviction cases
- ☒ Police regularly meet with the PHA management and residents
- ☒ Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services
- ☐ Other activities (list below)

1. Which developments are most affected? (list below)

Oaklawn, Gulf Village, R.V. Taylor, Jessie Thomas, Orange Grove,
Albert Owens, Josephine Allen, Roger Williams, Thomas James

D. Additional information as required by PHDEP/PHDEP Plan

PHAs eligible for FY 2000 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

- ☒ Yes ☐ No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- ☒ Yes ☐ No: Has the PHA included the PHDEP Plan for FY 2001 in this PHA Plan?
- ☒ Yes ☐ No: This PHDEP Plan is an Attachment. (Attachment Filename: F)

14. RESERVED FOR PET POLICY

[24 CFR Part 903.7 9 (n)]

Refer to Policy in Attachment G

15. Civil Rights Certifications

[24 CFR Part 903.7 9 (o)]

Civil rights certifications are included in the PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations.

16. Fiscal Audit

[24 CFR Part 903.7 9 (p)]

1. ☒ Yes ☐ No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h))?
(If no, skip to component 17.)
2. ☒ Yes ☐ No: Was the most recent fiscal audit submitted to HUD?
3. ☐ Yes ☒ No: Were there any findings as the result of that audit?
4. ☐ Yes ☐ No: If there were any findings, do any remain unresolved?
If yes, how many unresolved findings remain? _____
5. ☐ Yes ☐ No: Have responses to any unresolved findings been submitted to HUD?
If not, when are they due (state below)?

17. PHA Asset Management

[24 CFR Part 903.7 9 (q)]

Exemptions from component 17: Section 8 Only PHAs are not required to complete this component. High performing and small PHAs are not required to complete this component.

1. ☒ Yes ☐ No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?
2. What types of asset management activities will the PHA undertake? (select all that apply)

- ☐ Not applicable
- ☐ Private management
- ☒ Development-based accounting
- ☒ Comprehensive stock assessment
- ☒ Other: (list below)
Energy assessment/utility audit

3. ☐ Yes ☒ No: Has the PHA included descriptions of asset management activities in the **optional** Public Housing Asset Management Table?

18. Other Information

[24 CFR Part 903.7 9 (r)]

A. Resident Advisory Board Recommendations

1. ☒ Yes ☐ No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?

2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)

- ☐ Attached at Attachment (File name)
- ☒ Provided below: Comments on Section 18B, item number 2 – According to the residents, the resident who serves on the PHA Board was nominated and elected by the City-Wide Resident Council. The recommendation was forwarded to the MHB Board and the Board recommended the appointment to the Mayor. The Mayor then appointed the Resident Commissioner to a five- year term.

3. In what manner did the PHA address those comments? (select all that apply)

- ☐ Considered comments, but determined that no changes to the PHA Plan were necessary.
- ☐ The PHA changed portions of the PHA Plan in response to comments
List changes below:
- ☒ Other: (list below) Considered the comments, no changes made – Due to the fact the resident who serves on the Board must be appointed by the Mayor .
Incorporated Attachment I – Resident Membership of the PHA Governing Board which outlined the process.

B. Description of Election process for Residents on the PHA Board

1. ☐ Yes ☒ No: Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)

2. ☐ Yes ☒ No: Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)

3. Description of Resident Election Process

a. Nomination of candidates for place on the ballot: (select all that apply)

- ☐ Candidates were nominated by resident and assisted family organizations
☐ Candidates could be nominated by any adult recipient of PHA assistance
☐ Self-nomination: Candidates registered with the PHA and requested a place on ballot
☐ Other: (describe)

b. Eligible candidates: (select one)

- ☐ Any recipient of PHA assistance
☐ Any head of household receiving PHA assistance
☐ Any adult recipient of PHA assistance
☐ Any adult member of a resident or assisted family organization
☐ Other (list)

c. Eligible voters: (select all that apply)

- ☐ All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance)
☐ Representatives of all PHA resident and assisted family organizations
☐ Other (list)

C. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: (provide name here) City of Mobile
2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)
- ☒ The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
- ☒ The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- ☒ The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.

☐ Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)

☐ Other: (list below)

4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

Annually funds activities for youth recreation and counseling services, job training and development, added police security, and housing rehabilitation services under the Community Development Block Grant Program. In addition, collaborates with the Mobile Housing Board (MHB) by setting aside funds for the MHB to provide Tenant Based Rental Assistance under the HOME program.

D. Other Information Required by HUD

Use this section to provide any additional information requested by HUD.

Required Attachments

- Attachment A:** *Admissions Policy for Deconcentration*
(Final Rule pending at time of submission)
- Attachment B:** Fiscal Year 2001 Capital Fund Annual Statement
- Attachment C:** Public Housing Resident Community Service Requirement Policy
- Attachment D:** Progress Report
- Attachment E:** Fiscal Year 2001 Capital Fund Program Five-Year Action Plan
- Attachment F:** PHDEP Plan
- Attachment G:** Pet Policy
- Attachment H:** Assessment of Site-Based Waiting List Development Demographics
- Attachment I:** Resident Member of the PHA Governing Board
- Attachment J:** Membership of the Resident Advisory Board

Optional Attachments

- Attachment K:** PHA Management Organization Chart
- Attachment L:** Fiscal Year 1999 Customer Service & Satisfaction Survey Follow-Up Plans

Attachment A

Admissions Policy for Deconcentration

No Final Rule has been issued for Deconcentration at the time of submission of this plan.

Annual Statement/Performance and Evaluation Report Comprehensive Grant Program (CGP) Part I: Summary

U.S. Department of Housing
and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/98)

HA Name MOBILE HOUSING BOARD	Comprehensive Grant Number AL09P002709/CF 2000	FFY of Grant Approval 2000
--	--	--------------------------------------

Original Annual Statement Reserve for Disaster/Emergencies Revised Annual Statement/Revision Number _____ Performance & Evaluation Report for Program Year Ending _____
Final Performance & Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	
		Original	Revised (1)	Obligated	Expended
1	Total Non-CGP Funds				
2	1406 Operations (May not exceed 10% of line 19)				
3	1408 Management Improvements	\$985,615.00			
4	1410 Administration	380,681.00			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	408,120.00			
8	1440 Site Acquisition				
9	1450 Site Improvement	48,000.00			
10	1460 Dwelling Structures	5,703,013.00			
11	1465.1 Dwelling Equipment - Nonexpendable				
12	1470 Nondwelling Structures	100,000.00			
13	1475 Nondwelling Equipment	226,000.00			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1495.1 Relocation Costs				
17	1498 Mod Used for Development				
18	1502 Contingency (May not exceed 8% of line 19)				
19	Amount of Annual Grant (Sum of lines 2-18)	\$7,851,429.00			
20	Amount of line 19 Related LBP Activities				
21	Amount of line 19 Related to Section 504 Compliance				
22	Amount of line 19 Related to Security				
23	Amount of line 19 Related to Energy Conservation Measures				

Signature of Executive Director and Date X	Signature of Public Housing Director/Office of Native American Programs Administrator and Date X
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1- To be completed for the Performance and evaluation report or a Revised Annual Statement
2- To be completed for the Performance and Evaluation Report.

Annual Statement/Performance and Evaluation
Comprehensive Grant Program (CGP)**Part II: Supporting Pages**

**U.S. Department of Housing
and Urban Development**
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/98)

Development Number/Name HA - Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
PHA-WIDE MANAGE- MENT IMPROVE- MENTS		1408						
A)	Provide Technical Assistance Management Consultant			\$ 50,000.00				
B)	Provide Staff Training			100,000.00				
C)	Strategic Planning			10,000.00				
D)	Provide Computer Upgrades and Equipment			100,000.00				
E)	Marketing & Advertising Campaign			50,000.00				
F)	Telecommunication System Upgrades			20,000.00				
G)	Vacancy Reduction Program			300,000.00				
H)	Provide Summer Youth Employment Program			80,000.00				
I)	Supportive Salary Prorations of New Positions and Unit Marketability Personnel			275,615.00				
	<u>SUB-TOTAL 1408</u>			<u>\$985,615.00</u>				

Signature of Executive Director and Date

X

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

X

(1) To be completed for Performance and Evaluation Report or a Revised Annual Statement.
(2) To be completed for the Performance and Evaluation Report.

Page 2 of 7

Facsimile of form HUD-52837 (10/96) ref Handbook 748

U.S. Department of Housing

OMB Approval No. 2577-0157 (Exp. 7/31/98)

Annual Statement/Performance and Evaluation
Comprehensive Grant Program (CGP)**Part II: Supporting Pages**

and Urban Development
Office of Public and Indian Housing

Development Number/Name HA - Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
PHA-WIDE ADMINISTRA- TION		1410						
A)	Non-Technical Salaries for One (1) Year:	1410.1		\$ 60,621.00				
	1-Office Assistant II							
	1-Office Assistant I							
B)	Technical Salaries For One (1) Year:	1410.2		190,190.00				
	1-Director of Mod. & Development							
	1-Modernization Coordinator							
	1-Building Maintenance Superintendent							
	1-Public Service Supervisor							
	10%-Executive Director							
	10%-Comptroller							
	10%-Purchasing Agent							
	5%-Data Processing Manager							
	5%-Computer Support Coordinator							
C)	Employee Benefits Contribution	1410.9		103,370.00				
D)	Travel	1410.10		5,000.00				
E)	Publications	1410.12		1,000.00				
F)	Telephone and Facsimile	1410.16		500.00				
G)	Sundry	1410.19		20,000.00				
	<u>SUB-TOTAL 1410</u>			<u>\$ 380,681.00</u>				

Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

X

X

(1) To be completed for Performance and Evaluation Report or a Revised Annual Statement.
(2) To be completed for the Performance and Evaluation Report.

Annual Statement/Performance and Evaluation
Comprehensive Grant Program (CGP)**Part II: Supporting Pages**

**U.S. Department of Housing
and Urban Development**
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/98)

Development Number/Name HA - Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
AL 2-1 OAKLAWN HOMES	Install Additional Playground (Tot Lot)	1450		\$16,000.00				
	<u>SUB-TOTAL AL 2-1</u>			<u>\$16,000.00</u>				
AL 2-9 JESSE THOMAS HOMES	Replace Windows and Exterior Doors to 80 Dwelling Units	1460		\$ 703,000.00				
	Install Two (2) Playgrounds (Tot Lots)	1450		32,000.00				
	A & E Fees for Design Services & Costs	1430		50,313.00				
	<u>SUB-TOTAL AL 2-9</u>			<u>\$ 785,313.00</u>				
AL 2-10 R. V. TAYLOR PLAZA	Replace Asbestos-containing Floor Tile to 450 Dwelling Units	1460		\$1,056,866.00				
	A & E Fees for Design Services & Costs	1430		75,629.00				
	<u>SUBTOTAL AL 2-10</u>			<u>\$1,132,495.00</u>				
AL 2-11 THOMAS JAMES PLACE	Comprehensive Renovations (Final Phase)	1460		\$3,707,147.00				
	A & E Fees for Design Services & Costs	1430		265,290.00				
	Renovate Refrigeration Shop	1470		100,000.00				
	Purchase Four (4) Mower Decks @ \$12,500.00 each	1475		226,000.00				
	Purchase Two (2) 20-hp Tractors With Bushog @ \$25,000.00 each							
	Purchase Two (2) Lawn Sweepers @ \$25,000.00 each							

Signature of Executive Director and Date

X

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

X

(1) To be completed for Performance and Evaluation Report or a Revised Annual Statement.
7485.3

(2) To be completed for the Performance and Evaluation Report.

Facsimile of form HUD-52837 (10/96) ref Handbook

Annual Statement/Performance and Evaluation
Comprehensive Grant Program (CGP)**Part II: Supporting Pages**

**U.S. Department of Housing
and Urban Development**
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/98)

Development Number/Name HA - Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Development Number/Name HA - Wide Activities
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
AL 2-11 THOMAS JAMES PLACE (CONTINUED)	Purchase Office Furniture & Equipment for Various Sites @ \$30,000.00	1475						
	Replace Three (3) Passenger Vehicles @ \$15,330.00 each							
	<u>SUB-TOTAL AL 2-11</u>			<u>\$4,298,439.00</u>				
AL 2-12 CENTRAL PLAZA TOWERS	Provide Air-Conditioning to 70 Dwelling Units	1460		\$140,000.00				
	A & E Fees for Design Services & Costs	1430		10,020.00				
	<u>SUB-TOTAL AL 2-12</u>			<u>\$150,020.00</u>				
AL 2-15 CENTRAL PLAZA TOWERS	Provide Air-Conditioning to 24 Dwelling Units	1460		\$48,000.00				
	A & E Fees for Design Services & Costs	1430		3,434.00				
	<u>SUB-TOTAL AL 2-11</u>			<u>\$51,434.00</u>				
AL 2-16 FRANK BOYKIN TOWER	Provide Air-Conditioning to 24 Dwelling Units	1460		\$48,000.00				
	A & E Fees for Design Services & Costs	1430		3,434.00				
	<u>SUB-TOTAL AL 2-16</u>			<u>\$51,434.00</u>				
	<u>GRAND TOTAL</u>			<u>\$7,851,429.00</u>				
Signature of Executive Director and Date			Signature of Public Housing Director/Office of Native American Programs Administrator and Date					
X			X					

(1) To be completed for Performance and Evaluation Report or a Revised Annual Statement.
(2) To be completed for the Performance and Evaluation Report.

Annual Statement/Performance and Evaluation
Comprehensive Grant Program (CGP) **Part III: Implementation Schedule**

**U.S. Department of Housing
and Urban Development
Office of Public and Indian Housing**

OMB Approval No. 2577-0157 (Exp. 7/31/98)

Development Number/Name HA - Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates (2)
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)	
PHA-WIDE MANAGE- MENT IMPROVE- MENTS							
A)	03/2002			09/2003			
B)	03/2002			09/2003			
C)	03/2002			09/2003			
D)	03/2002			09/2003			
E)	03/2002			09/2003			
F)	03/2002			09/2003			
G)	03/2002			09/2003			
H)	03/2002			09/2003			
I)	03/2002			09/2003			
FEES AND COSTS							
AL 2-9	03/2002			09/2003			
AL 2-10	03/2002			09/2003			
AL 2-11	03/2002			09/2003			
AL 2-12	03/2002			09/2003			
AL 2-15	03/2002			09/2003			
AL 2-16	03/2002			09/2003			

Signature of Executive Director and Date

X

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

X

(1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

Development Number/Name HA - Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates (2)
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)	
AL 2-1 OAKLAWN HOMES	03/2002			09/2003			
AL 2-9 JESSE THOMAS HOMES	03/2002			09/2003			
AL 2-10 R. V. TAYLOR PLAZA	03/2022			09/2003			
AL 2-11 THOMAS JAMES PLACE	03/2002			09/2003			
AL 2-12 CENTRAL PLAZA TOWERS	03/2002			09/2003			
AL 2-15 CENTRAL PLAZA TOWERS	03/2002			09/2003			
AL 2-16 BOYKIN TOWER	03/2002			09/2003			

Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

X

X

Attachment C

Public Housing Resident Community Service Requirement Policy

Requirements

Each adult resident (18 years or older) of the Mobile Housing Board (MHB) must:

1. contribute eight (8) hours per month of Community Service, not including political activities, within the community in which that adult resides; or
2. participate in an Economic Self-Sufficiency Program for eight (8) hours per month.

For purposes of this section, the term “Economic Self-Sufficiency Program” is designed to encourage, assist, train, or facilitate the economic independence of participants and their families. This provides work for participants, including programs for job training, employment counseling, work placement, basic skills training, education, workfare, and financial independence. The program also provides household management, work experience and apprenticeship training and other activities.

The MHB will provide exemptions to the Community Service and Economic Self-Sufficiency requirements if the adult resident(s):

- A. is 62 years of age or older;
- B. is blind or disabled or is a primary caretaker of such resident;
- C. is engaged in a work activity of the Social Security Act;
- D. meets the requirement for being exempted from having to engage in a work activity under the State Program funded under part A of Title IV of the Social Security Act, or under any other welfare program in Alabama, including a State administered welfare-to-work program; or
- E. is in a family receiving assistance under a State Program funded under part A of Title IV of the Social Security Act, or under any other welfare program in Alabama, including a State administered welfare-to-work program, and has not been found by the State or other administering entity to be in non-compliance with the program.

Compliance

The Head of Household and spouse will be notified at least 90 days before the scheduled Annual Re-examination's effective date, by mail. They must provide all specified information, complete an Application for Continued Occupancy and sign necessary forms and documentation.

At the time of the interview for the Annual Re-examination, the MHB will verify if the adult resident(s) in the household has complied with the Community Service and Economic Self-Sufficiency requirements. If compliance was completed, including the specified information needed for the Annual Re-examination, the MHB may extend the lease.

Non-Compliance

The MHB will not renew or extend any lease, or provide any new lease, for a dwelling unit in public housing for any household that includes an adult member who was to participate in the Community Service and Self-Sufficiency requirements, and failed to comply.

At the time of the Annual Re-examination interview, if the MHB finds that the adult resident(s) in the household did not comply with the Community Service and Economic Self-Sufficiency requirements, the MHB will:

- A. Notify the head of household of such non-compliance
- B. Inform the head of household of the determination of non-compliance and that they have a right to follow the administrative grievance procedure; and unless the resident enters an agreement to complete the Community Service and Economic Self-Sufficiency requirements that their lease will not be renewed
- C. Take necessary steps to terminate the tenancy of the household in accordance with the principles of due process and on a non-discriminatory basis

To Become Compliant

The resident(s) in the household must enter into an agreement stating they will participate and complete eight (8) hours (per month) of Community Service or participate in an Economic Self-Sufficiency Program. The resident may use as many hours as needed to comply with the requirement over the 12 month term of the lease, before the re-examination effective date.

To fulfill the Community Service requirements the MHB may suggest or encourage that the resident(s) volunteer through a resident organization. Suggestions on types of work could include, but are not limited to:

- A. Monitoring Playgrounds
- B. Assisting with Mowing Grass and Curb Appeal
- C. Participating in After-School Programs
- D. Assisting with Trash Pick-Up of Large Bulk Items
- E. Cleaning Maintenance Shop Areas
- F. Filing in Work Order Centers
- G. Answering Phones in Management Offices
- H. Passing Out MHB Literature

The MHB may also suggest or encourage Community Service requirements be fulfilled through a local business or service provider having experience in administering volunteer-based Community Service programs within the area of the Housing Authority.

The Community Service or participation in an Economic Self-Sufficiency Program may be performed at a location not owned by the MHB.

Decreases in Income for Non-Compliance

A family receiving welfare or public assistance benefits may have a reduction in their benefits if compliance is not made under their assistance program. This program requires participation in an Economic Self-Sufficiency Program or imposing work activities. If benefits are reduced due to non-compliance, the amount required to be paid by the family as monthly rent will not be decreased by the MHB, during the time of reduction.

A family receiving a reduction in benefits from welfare or public assistance due to the expiration of a lifetime time limit will not be considered as failing to comply. Due to the reduction of benefits the amount required to be paid by the family as monthly rent will be decreased by the MHB.

Fraud

If a family receiving welfare or public assistance benefits commits the act of fraud, benefits will be reduced. The amount the family is required to pay as monthly rent will not be decreased by the MHB during the period of reduction.

Notification

The MHB must receive from the agency providing assistance under the Assistance Act, written notification specifying that the family's benefits have been reduced. The notification would state the non-compliance of participation in work activities or the Self-Sufficiency program, as well as, fraud, if applicable. The time frame and level of reduction would also be indicated.

Any family residing in public housing that is affected by a reduction in benefits has the right to review the MHB's determination through the administrative grievance procedure.

Attachment D

Progress Report

The Mobile Housing Board has implemented various strategies in FY 2000 to accomplish the goals and objectives outlined in its 5-Year Plan for the period FY 2000-2004.

The following highlights a few accomplishments and action taken by the Mobile Housing Board to meet goals and objectives of the 5-Year Plan:

- Applied for and received 122 Section 8 vouchers for Non-elderly persons with Disabilities in support of Designated Housing.
- Applied for and received 100 Section 8 vouchers for the Family Unification Program.
- Decentralized Central Maintenance and placed maintenance personnel at each site.
- Implementation of the Uniform Physical Conditions Standards inspections for Public Housing.
- Implementation of site-based waiting list for Public Housing units.
- Received approval to designate Boykin Towers as a development for Elderly only.
- 100% utilization and lease-up of Section 8 vouchers and certificates.
- Renovated/modernized Public Housing units during the Fiscal Year.
- Hired a new Security Coordinator to implement Public Housing security improvements.
- Measures taken to ensure equal opportunity in Housing for all Americans.
- Redesigned the MHB organizational and program structure and improved oversight of the Agency's operations, expedited communication and decision making and increased accountability for results, service delivery and productivity.
- Acquired nine houses from the City of Mobile to be rehabilitated and sold to low-income families.
- Sold five Affordable Homes to low-income families.
- Established a local preference for working families applying for Public Housing and Section 8 assistance.
- Upgrade of computer hardware and software.
- Development and implementation of a Strategic Plan for the Agency.
- We provided supportive services to improve assistance recipients' employability through the Clinton L. Johnson Center for Economic Development's programs.
- We attracted and coordinated supportive services which increased independence for our elderly and families with disabilities with Senior Citizens Services, Mobile Area Agency on Aging, United Cerebral Palsy of Mobile and other service oriented organizations.
- We screen all applicants over 17 years of age for criminal background in an effort to curb the incidence of crime in our Public Housing communities and Section 8 program.
- We have formally and informally combined resources with external partners to advance common goals. For example: Boys & Girls Scouts, Boys & Girls Clubs, MLK Redevelopment Corporation, Catholic Social Services, etc.
- Community awareness of the MHB has increased as a result of positive public relations associated with the modernization of Thomas James Place, the construction of the Economic Development Center, West Cardinal Place and our Affordable Homes.
- Our position as the leader in the housing industry in Mobile has been established and is evidenced by the referrals we receive from "Apartment Finders", HUD in Birmingham, the Department of Human Resources, Catholic Social Services, Congressmen, Mayor's Office, Salvation Army, Salvation Army Women's and Children's Shelter, Penelope House, Sybil Smith Village, etc.
- The Agency has improved the "package" that is offered to our applicants/residents by including services other than housing. Examples include: Family Self-Sufficiency Program, E. D. Programs, Wheels-to-Work Program, Health Clinics, etc.
- There is a higher degree of resident involvement and input in the planning/development stage of MHB organizations via communication with the City-Wide Resident Council and the individual Resident Associations for each site.

**Five-Year Action Plan
Part I: Summary
Comprehensive Grant Program (CGP)**

**U.S. Department of Housing
and Urban Development
Office of Public and Indian Housing**

OMB Approval No. 2577-0157 (Exp. 07/31/98)

HA Name: Mobile Housing Board		Locality (City/County & State): Mobile, Mobile, Alabama		X Original ___ Revision No.	
A. Development Number/Name	Work Stmt. for Year 1 FFY: 2000	Work Statement for Year 2 FFY: 2001	Work Statement for Year 3 FFY: 2002	Work Statement for Year 4 FFY: 2003	Work Statement for Year 5 FFY: 2004
AL 2-9 Jesse Thomas Homes					\$100,000.00
AL 2-12 Central Plaza Towers		140,000.00			
AL 2-15 Central Plaza Towers	See	52,000.00			
AL 2-16 Frank Boykin Tower	Annual	52,000.00			
AL 2-13 Emerson Gardens	Statement	30,000.00			
AL 2-6 Gulf Village Homes		1,056,866.00	\$5,910,133.00	\$5,910,133.00	3,000,000.00
AL 2-10 R. V. Taylor Plaza		4,667,227.00			930,000.00
AL 2-3 Roger Williams Homes					100,000.00
AL 2-8 Josephine Allen Homes					1,780,133.00
B. Physical Improvements Subtotal		\$5,998,093.00	\$5,910,133.00	\$5,910,133.00	\$5,910,133.00
C. Management Improvements		905,615.00	905,615.00	905,615.00	905,615.00
D. HA-Wide Nondwelling Structures and Equipment		125,000.00	200,000.00	200,000.00	200,000.00
E. Administration		410,681.00	410,681.00	410,681.00	410,681.00
F. Other A/E Fees		412,040.00	425,000.00	425,000.00	425,000.00
G. Operations					
H. Demolition					
I. Replacement Reserve					
J. Mod Used for Development					
K. Total CGP Funds		\$7,851,429.00	\$7,851,429.00	\$7,851,429.00	\$7,851,429.00
L. Total Non-CGP Funds					
M. Grand Total					
Signature of Executive Director and Date:			Signature of Public Housing Director/Office of Native American Programs Administrator and Date:		
X			X		

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

U.S. Department of Housing
 and Urban Development
 Office of Public and Indian Housing

OMB Approval No. 2577-0157 (exp. 7/31/98)

Work Statement for Year 1 FFY: <u>2000</u>	Work Statement for Year <u>2</u> FFY: <u>2001</u>			Work Statement for Year <u>3</u> FFY: <u>2002</u>		
	Development Number/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/General Description of Major Work Categories	Quantity	Estimated Costs
See Annual Statement	<u>AL 2-12 Central Plaza Towers</u> Provide Air Conditioning to 70 Dwelling Units		\$140,000.00	<u>AL 2-6 Gulf Village Homes</u>		\$5,910,133.00
	<u>AL 2-15 Central Plaza Towers</u> Provide Air Conditioning to 26 Dwelling Units		\$52,000.00			
	<u>AL 2-16 Frank Boykin Tower</u> Provide Air Conditioning to 26 Dwelling Units		\$52,000.00			
	<u>AL 2-13 Emerson Gardens</u> Modifications to Rental Office and Community Building for Physical Accessibility		\$30,000.00			
	<u>AL 2-10 R. V. Taylor Plaza</u> Replace Windows, Exterior Doors, Screen Doors, and Modify Entry Porch to 450 Dwelling Units		\$4,667,227.00			
	<u>AL 2-6 Gulf Village Homes</u> Construct New Administration/ Community Building		\$1,056,866.00			
	Subtotal of Estimated Cost		\$5,998,093.00	Subtotal of Estimated Cost		\$5,910,133.00

Five-Year Action Plan

Part II: Supporting Pages**Physical Needs Work Statement(s)**

Comprehensive Grant Program (CGP)

U.S. Department of Housing
and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (exp. 7/31/98)

Work Statement for Year 1 FFY: <u>2000</u>	Work Statement for Year <u>4</u> FFY: <u>2003</u>			Work Statement for Year <u>5</u> FFY: <u>2004</u>		
	Development Number/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/General Description of Major Work Categories	Quantity	Estimated Costs
	<u>AL 2-6 Gulf Village Homes</u>			<u>AL 2-3 Roger Williams Homes</u>		
	Comprehensive Interior and Exterior Renovations to Approximately 80 Dwelling Units		\$5,910,133.00	Renovate Community Center for 504 Compliance		\$100,000.00
				<u>AL 2-6 Gulf Village Homes</u>		
				Comprehensive Renovation of 40 Dwelling Units (Final Phase)		3,000,000.00
See				<u>AL 2-8 Josephine Allen Homes</u>		
Annual				Renovate Community Center for 504 Compliance		100,000.00
Statement				Install Windows, Security Window Screens, and Security Screen Doors in 292 Dwelling Units		876,000.00
				Install Central HVAC in 292 Dwelling Units		804,133.00
				<u>AL 2-9 Jesse Thomas Homes</u>		
				Renovate Community Center for 504 Compliance		100,000.00
				<u>AL 2-10 R. V. Taylor Plaza</u>		
				Install Central HVAC System in 450 Dwelling Units		830,000.00
				Renovate Community Center for 504 Compliance		100,000.00

	Subtotal of Estimated Cost	\$5,910,133.00	Subtotal of Estimated Cost	\$5,910,133.00
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Page 3 of 5

Facsimile form **HUD-52834** (10/96)

Five-Year Action Plan
Part III: Supporting Pages
Management Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

**U.S. Department of Housing
 and Urban Development**
 Office of Public and Indian Housing

OMB Approval No. 2577-0157 (exp. 7/31/98)

Work Statement for Year 1 FFY: <u>2000</u>	Work Statement for Year <u>2</u> FFY: <u>2001</u>			Work Statement for Year <u>3</u> FFY: <u>2002</u>		
	General Description of Major Work Categories	Quantity	Estimated Cost	General Description of Major Work Categories	Quantity	Estimated Costs
	Provide Technical Assistance Management Consultant		\$ 50,000.00	Provide Technical Assistance Management Consultant		\$ 50,000.00
	Provide Staff Training		\$100,000.00	Provide Staff Training		\$100,000.00
	Strategic Planning		\$ 25,000.00	Strategic Planning		\$ 25,000.00
See	Provide Computer Upgrades and Equipment		\$50,000.00	Provide Computer Upgrades and Equipment		\$50,000.00
Annual	Marketing and Advertising Campaign		\$25,000.00	Marketing and Advertising Campaign		\$25,000.00
	Vacancy Reduction Program		\$300,000.00	Vacancy Reduction Program		\$300,000.00
Statement	Summer Youth Employment Program		\$ 80,000.00	Summer Youth Employment Program		\$ 80,000.00
	Supportive Salary Prorations of New Positions and Unit Marketability Personnel		\$275,615.00	Supportive Salary Prorations of New Positions and Unit Marketability Personnel		\$275,615.00

	Subtotal of Estimated Cost	\$905,615.00	Subtotal of Estimated Cost	\$905,615.00	

Page 4 of 5

Five-Year Action Plan
Part III: Supporting Pages
Management Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

U.S. Department of Housing
 and Urban Development
 Office of Public and Indian Housing

OMB Approval No. 2577-0157 (exp. 7/31/98)

Work Statement for Year 1 FFY: <u>2000</u>	Work Statement for Year <u>4</u> FFY: <u>2003</u>			Work Statement for Year <u>5</u> FFY: <u>2004</u>		
	General Description of Major Work Categories	Quantity	Estimated Cost	General Description of Major Work Categories	Quantity	Estimated Costs
	Provide Technical Assistance Management Consultant		\$50,000.00	Provide Technical Assistance Management Consultant		\$50,000.00
	Provide Staff Training		\$100,000.00	Provide Staff Training		\$100,000.00
See						
Annual	Strategic Planning		\$25,000.00	Strategic Planning		\$25,000.00
Statement						
	Provide Computer Upgrades and Equipment		\$50,000.00	Provide Computer Upgrades & Equipment		\$50,000.00
	Marketing and Advertising Campaign		\$25,000.00	Marketing and Advertising Campaign		\$25,000.00
	Vacancy Reduction Program		\$300,000.00	Vacancy Reduction Program		\$300,000.00
	Summer Youth Employment Program		\$80,000.00	Summer Youth Employment Program		\$80,000.00
	Supportive Salary Prorations of New Positions and Unit Marketability Personnel		\$275,615.00	Supportive Salary Prorations of New Positions and Unit Marketability Personnel		\$275,615.00

	Subtotal of Estimated Cost	\$905,615.00	Subtotal of Estimated Cost	\$905,615.00

Public Housing Drug Elimination Program Plan

Note: THIS PHDEP Plan template (HUD 50075-PHDEP Plan) is to be completed in accordance with Instructions located in applicable PIH Notices.

Annual PHDEP Plan Table of Contents:

1. General Information/History
2. PHDEP Plan Goals/Budget
3. Milestones
4. Certifications

Section 1: General Information/History

A. Amount of PHDEP Grant \$ 965,488.00

B. Eligibility type (Indicate with an "x") N1_____ N2_____ R **X**

C. FFY in which funding is requested 2000

D. Executive Summary of Annual PHDEP Plan

In the space below, provide a brief overview of the PHDEP Plan, including highlights of major initiatives or activities undertaken. It may include a description of the expected outcomes. The summary must not be more than five (5) sentences long

The **PHDEP 2000 plan** will include the continuation of community oriented policing (walking, riding and foot patrols), physical improvements, drug prevention, intervention and therapeutic treatment initiatives. The MHB will continue to increase job training and private-sector employment programs, life skills and youth sports as an alternative to combat drug abuse. Special emphasize will be geared toward family education and enrichment programs designed to promote healthy and enhanced parenting practices. GED preparation, mentoring, academics, computer skills training, and conflict resolution will be provided to promote self-sufficiency.

E. Target Areas

Complete the following table by indicating each PHDEP Target Area (development or site where activities will be conducted), the total number of units in each PHDEP Target Area, and the total number of individuals expected to participate in PHDEP sponsored activities in each Target Area.

PHDEP Target Areas (Name of development(s) or site)	Total # of Units within the PHDEP Target Area(s)	Total Population to be Served within the PHDEP Target Area(s)
A. F. Owens	407	500
Central Plaza Towers	472	230
Emerson Gardens	94	50
Frank Boykin Tower	122	50
Jesse Thomas Homes	380	700
Josephine Allen Homes	292	381
Oaklawn Homes	100	125
Orange Grove	298	250
Roger Williams Homes	452	500
R. V. Taylor	450	500
Thomas James Place/Rehab 1- II	782	600
West Cardinal Place	14	15

F. Duration of Program

Indicate the duration (number of months funds will be required) of the PHDEP Program proposed under this Plan (place an "x" to indicate the length of program by # of months. For "Other", identify the # of months).

6 Months _____ 12 Months _____ 18 Months _____ 24 Months X
Other _____

G. PHDEP Program History

Indicate each FY that funding has been received under the PHDEP Program (place an "x" by each applicable Year) and provide amount of funding received. If previously funded programs have not been closed out at the time of this submission, indicate the fund balance and anticipated completion date. For grant extensions received, place "GE" in column or "W" for waivers.

Fiscal Year of Funding	PHDEP Funding Received	Grant #	Fund Balance as of Date of this Submission	Grant Extensions or Waivers	Anticipated Completion Date
FY 1995 - x	\$1,045,000.00	AL09DEP0020195	0		
FY 1996 - x	\$1,044,250.00	AL09DEP0020196	0	GE	
FY 1997 - x	\$1,086,020.00	AL09DEP0020197	0	GE	
FY 1998 - x	\$1,086,020.00	AL09DEP0020198	\$204,657.80		12/31/00
FY 1999 - x	\$ 926,389.00	AL09DEP0020199	\$904,890.89		12/31/01
FY 2000 - x	\$ 965,488.00	AL09DEP0020100	\$965,488.00		12/31/02

Section 2: PHDEP Plan Goals and Budget

A. PHDEP Plan Summary

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and objectives, the role of plan partners, and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences.

The MHB proposes to increase security initiatives through the continued coordination with the Mobile Police Department, Mobile County Sheriff and the Prichard Police Department. Drug treatment, prevention, intervention, and economic development will continue through contract with the Franklin Health Center, Girls Scouts, District Attorney's office and 100 Black Men, Inc, etc. Our contracts with our partners include the requirements to provide baseline data, key milestones, and measurable goals on the basis of which contract compliance and performance are evaluated. In addition, each service provider will be monitored on a monthly basis to assure performance by reviewing periodic progress reports, reviewing activity files, and conducting interviews with various staff members.

B. PHDEP Budget Summary

Enter the total amount of PHDEP funding allocated to each line item.

FY <u>2000</u> PHDEP Budget Summary	
Budget Line Item	Total Funding
9110 - Reimbursement of Law Enforcement	\$312,000.00
9120 - Security Personnel	0
9130 - Employment of Investigators	0
9140 - Voluntary Tenant Patrol	0
9150 - Physical Improvements	15,000.00
9160 - Drug Prevention	301,500.00
9170 - Drug Intervention	115,000.00
9180 - Drug Treatment	60,000.00
9190 - Other Program Costs	161,988.00
TOTAL PHDEP FUNDING	\$ 965,488.00

C. PHDEP Plan Goals and Activities

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide information in shaded boxes. Information provided must be concise—not to exceed two sentences in any column. Tables for line items in which the PHA has no planned goals or activities may be deleted.

9110 - Reimbursement of Law Enforcement					Total PHDEP Funding: \$ 312,000.00		
Goal(s)	To provide security and community-policing programs (walking, riding, and foot patrols) at all sites.						
Objectives	To reduce drug-related crime at all targeted sites.						
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/ Source)	Performance Indicators
1. Mobile Police Dept.			3/1/01	2/28/02	\$210,000	0	Hire ten (10) police officers
2. Sheriff Dept.			6/1/01	5/31/02	50,000	0	Employ 22 P/T Sheriff officers
3. Prichard Police Dept.			7/1/01	6/30/02	52,000	0	Employ two (2) P/T police officers in the Gulf Village area

9150 - Physical Improvements					Total PHDEP Funding: \$15,000.00		
Goal(s)	To continue security initiatives through fencing, alarms, cameras and related security equipment.						
Objectives	To reduce criminal activities through increased physical improvements.						
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1. Security Fence			10/1/00	12/31/01	\$10,000	0	Provide 100 feet of security fencing
2. Security Equipment & Alarms			10/1/00	12/31/01	\$ 5,000	0	Install 3 cameras and alarms at targeted site
3.							

9160 - Drug Prevention					Total PHDEP Funding: \$301,500.00		
Goal(s)	To provide on-site recreation, drug awareness, job training, and life skills programs for low & moderate-income families.						
Objectives	To provide programs to help reduce the likelihood of drug abuse, crime and youth violence.						
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDep Funding	Other Funding (Amount /Source)	Performance Indicators
1. Life Skills and Recreation	2000	Youth ages 6-18	10/1/00	9/30/02	\$125,000	125,000	Provide life skills and organized athletics to youth ages 6-18
2. MHB Youth Sports	300	Youth ages 6-18	5/1/01	8/31/01	10,000	0	Expand youth sports to all developments
3. Educational Enrichment/Youth Mentoring	200	Youth ages 6-18	1/15/01	12/31/01	20,000	0	Expand educational enrichment programs by 20%
4. MHB/USA Internship	3	Young adults 18-25	11/1/00	12/31/01	8,500	0	Employ 3 college residents
5. Drugs & Teen Pregnancy Programs	300	Girls ages 6-18	10/1/00	9/30/01	58,000	8,000	Increase pregnancy awareness among teens by 30%
6. Summer Work Employment Experience Training Program	100	Youth ages 16-21	5/01/01	8/31/01	40,000	158,000	Employ 100 youth for a total of 340 hours per summer
7. Economic Development Programs	105	Adult Head-of-Households	11/1/00	12/31/02	40,000	0	Train 35 resident in economic development initiatives

9170 - Drug Intervention					Total PHDEP Funding: \$115,000.00		
Goal(s)	To provide services to residents in need of health care, counseling, and referral services.						
Objectives	To expand health cares services to seniors and families living in housing developments						
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDep Funding	Other Funding (Amount /Source)	Performance Indicators
1. Eldercare Program	606	Elderly 55 and above	10/1/00	9/30/01	\$45,000	0	Complete needs assessment to identify services required for the elderly
2. Seniors Adult Development Program	75	Elderly 55 and above	9/1/00	8/31/01	10,000	0	Increase adult health development among seniors
3. Health Care Screenings	1572	All ages	1/1/01	12/31/01	60,000	0	Expand health awareness among families by 30%

9180 - Drug Treatment					Total PHDEP Funding: \$60,000.00		
Goal(s)	To eliminate drug abuse through rehabilitation, referrals, counseling and other treatment strategies						
Objectives	To provide on-site treatment programs to eliminate substance abuse among youth and adults through outreach activities						
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDep Funding	Other Funding (Amount /Source)	Performance Indicators
1. Therapeutic Drug Treatment	200	Ages 8 to adults	10/1/00	9/30/01	\$60,000	0	Expand drug counseling and treatment initiatives through home visits by 50%

9190 - Other Program Costs					Total PHDEP Funds: \$161,988.00		
Goal(s)							
Objectives							
Proposed Activities	# of Person s Served	Target Popula tion	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1. Grants Coordinator			1/1/01	12/31/01	\$35,110.40	0	Continue staff support of PHDEP Programs
2. Security Coordinator			1/1/01	12/31/01	26,208.00	0	Continue staff support of PHDEP Programs
3. Program Aide			1/1/01	12/31/01	18,907.20	0	Continue staff support of PHDEP Programs
4. Office Assistant 1			1/1/01	12/31/01	19,323.20	0	Continue staff support of PHDEP Programs
5. Printing & Publications			1/1/01	12/31/01	1,600.00	0	Expand drug awareness information to residents through newsletters and flyers
6. Office Supplies/Equipment			1/1/01	12/31/01	2,429.05	0	Continue staff support of PHDEP Programs
7. Telephone/Internet Services			1/1/01	12/31/01	1,200.00	0	Increase resident knowledge and use of the World Wide Web
8. Trophies & Awards			1/1/01	12/31/01	500.00	0	Promote drug awareness and reward volunteers
9. Staff Travel & Training			1/1/01	12/31/01	5,500.00	0	Continue staff support of PHDEP Programs
10. Employee Benefits			1/1/01	12/31/01	38,166.91	0	Continue staff support of PHDEP Programs
11. Admin. Staff Support			1/1/01	12/31/01	13,043.24	0	Continue staff support of PHDEP Programs

Section 3: Expenditure/Obligation Milestones

Indicate by Budget Line Item and the Proposed Activity (based on the information contained in Section 2 PHDEP Plan Budget and Goals), the % of funds that will be expended (at least 25% of the total grant award) and obligated (at least 50% of the total grant award) within 12 months of grant execution.

Budget Line Item #	25% Expenditure of Total Grant Funds By Activity #	Total PHDEP Funding Expended (sum of the activities)	50% Obligation of Total Grant Funds by Activity #	Total PHDEP Funding Obligated (sum of the activities)
<i>e.g Budget Line Item # 9120</i>	<i>Activities 1, 3</i>		<i>Activity 2</i>	
9110	Activities 1,2,3	\$96,000.00	Activities 1,2,3	\$158,000.00
9120	N/A	-0-	N/A	-0-
9130	N/A	-0-	N/A	-0-
9140	N/A	-0-	N/A	-0-
9150	Activities 1,2	5,000.00	Activities 1	10,000.00
9160	Activities 1,2,5,7	58,250.00	Activities 3,4,6	146,500.00
9170	Activities 1,2,3	40,000.00	Activities 1,2,3	100,000.00
9180	Activities 1,2,3	30,000.00	Activities 1,2,3	60,000.00
9190	Activities 1,2,3,4,5,7,10,11	<u>38,004.00</u>	Activities 6,8,9	<u>76,009.00</u>
TOTAL		\$267,254.00		\$550,509.00

Section 4: Certifications

A comprehensive certification of compliance with respect to the PHDEP Plan submission is included in the “PHA Certifications of Compliance with the PHA Plan and Related Regulations.”

Section I.

PET POLICY

- I. 1. Pet Ownership: A resident may own one or more common household pets or have one or more common household pets present in the dwelling unit of such resident, subject to the following conditions:
 - A. Each Head of Household may own up to two pets. If one of the pets is a dog or cat, (or other four legged animal), the second pet must be contained in a cage or an aquarium for fish. Each bird or other animals, other than fish, shall be counted as one pet. For purposes of Housing Programs, domesticated animals such as dogs, cats, birds, rabbits, fish and turtles that are traditionally kept in the home for pleasure, rather than for commercial purposes, are considered as common household pets. Common household pets do not include reptiles (except turtles) or dangerous breeds of dogs such as Doberman Pinschers, Rottweilers, Bull Terriers, or any mixed breed dog with prominent characteristics of Pit Bulls or Rottweilers. Refer to Section I, Part 3 (Prohibited Animals). Acceptable turtles are Terrapin Box Turtles and Land Turtles. Snapper Turtles are unacceptable as common household pets.
 - B. If the pet is a dog or cat, it must be neutered/spayed by the age of three (3) months. The evidence can be provided by a statement/bill from a veterinarian and/or staff of the humane society. The evidence must be provided prior to the execution of this addendum and/or within 10 days of the pet becoming of the age to be neutered/spayed or declawed. Residents must provide waterproof and leak proof litter boxes for cat waste, which must be kept inside the dwelling unit. Cardboard boxes are not acceptable and will not be approved. The resident shall not permit refuse from litter boxes to accumulate nor to become unsightly or unsanitary. Also, the weight of a cat cannot exceed 10 pounds (fully grown) and a dog may not exceed 20 pounds in weight (fully grown). All other four-legged animals are limited to 10 pounds (fully grown).
 - C. If the pet is a bird, it shall be housed in a birdcage and cannot be let out of the cage at any time. Birds should be no larger than a parakeet.
 - D. If the pet is a fish, the aquarium must be twenty gallons or less, and the container must be placed in a safe location in the unit. The resident is limited to one container for the fish; however, there is no limit on the number of fish that can be maintained in the container as long as the container is maintained in a safe and nonhazardous manner. All fish must be nonpoisonous and not of a dangerous species, such as Guppies, Goldfish or Jack Dempksi.
 - E. All dogs within the City limits of Mobile over three months old are required to be licensed. Proof of current rabies inoculation is required for all license purchases.

- F. If the pet is a cat or dog, it must have received rabies and distemper inoculations or boosters, as applicable. Evidence of inoculations can be provided by a statement/bill from the county rabies officer, his/her authorized representative or any duly licensed veterinarian and must be provided before the execution of this agreement. Dogs and cats more than 3 months of age are required to be vaccinated against rabies. Vaccinations against rabies are good for one year.
- G. All pets must be housed within the unit and no facilities can be constructed outside of the unit for any pet. No animal shall be permitted to be loose and if the pet is taken outside it must be taken outside on a leash and kept off other residents lawns. Also, all pets must wear collars with identification at all times. Pets without a collar will be picked up immediately and transported to the Mobile Animal Shelter or other appropriate facility.
- H. All authorized pet(s) must be under the control of an adult. An unleashed pet, or one tied to a fixed object, is not considered to be under the control of an adult. Pets which are unleashed, or leashed and unattended, on MHB property may be impounded and taken to the Mobile Animal Shelter. It shall be the responsibility of the resident to reclaim the pet at the expense of the resident. Also, if a member of the MHB staff has to take a pet to the Mobile Animal Shelter the resident will be charged \$50 to cover the expense of taking the pet(s) to the Mobile Animal Shelter.
- I. Pet(s) may not be left unattended for more than twenty-four consecutive hours. If it is reported to MHB staff that a pet(s) has been left unattended for more than a twenty-four (24) consecutive hour period, MHB staff may enter the unit and remove the pet and transfer the pet to the Mobile Animal Shelter. Any expense to remove and reclaim the pet from any facility will be the responsibility of the resident. In the case of an emergency, the MHB will work with the resident to allow more than 24 hours for the resident to make accommodations for the pet.
- J. Pet(s), as applicable, must be weighed by a veterinarian. A statement containing the weight of the pet must be provided to the MHB prior to the execution of this agreement and upon request by the MHB.

Note: Any pet that is not fully-grown will be weighed every six months. Also, any pet that exceeds the weight limit at any time during occupancy will not be an eligible pet and must be removed from MHB property.

- 2. Responsible Pet Ownership: Each pet must be maintained responsibly and in accordance with this pet ownership lease addendum and in accordance with all applicable ordinances, state and local public health, animal control, and animal anti-cruelty laws and regulations governing pet ownership. Any waste generated by a pet must be properly and promptly disposed of by the resident to avoid any unpleasant and unsanitary odor from being in the unit.

3. Prohibited Animals: Animals or breeds of animals that are considered by the MHB to be vicious and/or intimidating will not be allowed. Some examples that have a reputation of a vicious nature are: reptiles, Rottweilers, Doberman Pinschers, Pit Bulldogs and/or any animal that displays vicious behavior. This determination will be made by a MHB representative prior to the execution of this lease addendum.
4. Pet(s) shall not disturb, interfere or diminish the peaceful enjoyment of other residents. The terms, "disturb, interfere or diminish" shall include but not be limited to barking, howling, chirping, biting, scratching and other like activities. This includes any pets that make noise continuously and/or incessantly for a period of 10 minutes or intermittently for one-half hour or more and therefore disturbs any person at any time of the day or night. The Housing Manager will terminate this authorization if a pet disturbs other residents under this section of the lease addendum. The resident will be given one week to make other arrangements for the care of the pet or the dwelling lease will be terminated.
5. If the animal should become destructive, create a nuisance, represent a threat to the safety and security of other persons, or create a problem in the area of cleanliness and sanitation, the Housing Manager will notify the resident, in writing, that the animal must be removed from the public housing development, within 10 days of the date of the notice from the MHB. The resident may request a hearing, which will be handled according to the MHB's established grievance procedure. The pet may remain with the resident during the hearing process unless the MHB has determined that the pet may be a danger or threat to the safety and security of other persons. If this determination has been made by the MHB, the pet must be immediately removed from the unit upon receipt of the notice from the MHB.
6. The resident is solely responsible for cleaning up the waste of the pet within the dwelling unit and on the premises of the public housing development. If the pet is taken outside it must be on a leash at all times. If there is any visible waste by the pet it must be disposed of in a plastic bag, securely tied and placed in the garbage receptacle for their unit. If the MHB staff is required to clean any waste left by a pet, the resident will be charged \$25 for the removal of the waste.
7. The resident shall have pets restrained so that maintenance can be performed in the apartment. The resident shall, whenever an inspection or maintenance is scheduled, either be at home or shall have all animals restrained or caged. If a maintenance person enters an apartment where an animal is not restrained, maintenance shall not be performed, and the resident shall be charged a fee of \$25. In addition, the work order will be considered closed with a notation –

unrestrained pet (dog/cat). If this same situation again occurs, the pet shall be removed from the premises. Pets that are not caged or properly restrained may be impounded by animal control officers or by MHB staff and taken to the Mobile Animal Shelter. It shall be the responsibility of the resident to reclaim the pet at the expense of the resident. Also, if a member of the MHB staff takes a pet to the Mobile Animal Shelter the resident will be charged an additional \$50 to cover the expense of taking the pet(s) to the Mobile Animal Shelter. The MHB shall not be responsible if any animal escapes from the residence due to maintenance, inspections or other activities of the landlord.

8. Pets may not be bred or used for any commercial purposes.
9. Dog or cat owners must take care to walk their pets away from pedestrian areas.
10. Residents must post a "BEWARE OF DOG" sign at their front entrance.
11. When a pet causes physical injury of any kind to any person on the property, the MHB must be notified by the owner and the owner must remove the pet immediately. The owner must supply to the management office a notarized letter stating when the pet was removed and the location of the pet.
12. Pet owners are expected to exercise responsible and courteous behavior so that the presence of their pet on the property in no way violates the right of others to peaceful enjoyment of the premises. Dogs and cats must be obedient.
13. Visiting pets are not allowed at any time on MHB premises unless it is a Service Animal ("SEEING EYE" or "HEARING EAR")
14. The owner of a pet will be responsible for the disposal (and the cost incurred) of the animal's remains upon death, from whatever cause, and regardless of the location of the remains of the animal on MHB property. ANIMAL REMAINS SHALL BE DISPOSED OF:

By or through the Public Works Department
By or through a duly licensed veterinarian; or
By action of the Police Department
15. Owners of dogs and cats will be responsible for submitting annually to the management office (at recertification) proof of professional extermination for fleas, ticks or other animal related pests.
16. Residents will be subject to eviction after three (3) violations in one year. Note: depending on circumstances, an eviction may be warranted before 3 violations occur in a one-year time frame.

17. The resident must provide the name, address and phone number of one or more responsible parties who will care for the pet if the pet owner becomes incapacitated or dies.
18. The resident indemnifies and holds MHB harmless of and from any damage or loss due to the resident's pets, but not exempting any negligence of the MHB, however occasioned, and also against and from all claims, damages, suits and expenses by reason of injury to any party or property owned and managed by the MHB subject to the limitation imposed on exculpatory clauses under Federal Regulations and State Laws regarding the acts or omission of the MHB.

Section II. SCHEDULE OF ANNUAL FEES AND INITIAL DEPOSIT

FEE AND DEPOSIT SCHEDULE (An annual fee and deposit is required for each pet)

<u>Type of Pet</u>	<u>Fee</u>	<u>Deposit</u>
Dog	\$150	\$250
Cat	\$100	\$150
Fish Aquarium	\$50	\$100
Fish Bowl (requires no power and no larger than two gallons)	\$0	\$25
Caged Pets	\$100	\$150

Note: The above schedule is applicable for each pet; therefore, if a resident has more than one pet he or she must pay the applicable annual fee and deposit for each pet.

The entire annual fee and deposit (subject to the exception listed below) must be paid prior to the execution of the lease addendum. No pet shall be allowed in the unit prior to the completion of the terms of this pet policy.

The annual fee shall be paid at the time of reexamination each year and all proof of inoculations and other requirements shall be made available to the MHB at such time. The annual fee is not reimbursable. The deposit made shall be utilized to offset damages caused by the pet and/or resident. Any balance, if any, from the deposit will be refunded to the resident at the time of move-out or removal of the pet. THERE SHALL BE NO REFUND OF THE ANNUAL FEE.

It shall be a serious violation of the lease for any resident to have a pet without proper approval and without having complied with the terms of this policy. Such violation shall be considered to be a violation of Paragraph IV (L) of the lease (a serious violation) and the MHB will issue a termination notice. The resident will be entitled to a grievance hearing in accordance with the provisions of Paragraph 5 of this Pet Policy or the Grievance Procedure, as applicable.

MOBILE HOUSING BOARD
PET OWNERSHIP LEASE ADDENDUM
RESIDENT ACKNOWLEDGMENT

After reading and/or having read to me this lease addendum I, _____
(Print Name)

agree to the following:

I agree to abide by the requirements outlined in this lease addendum for pet ownership and to keep the pet(s) in accordance with this addendum.

I agree and understand that I am liable for any damage or injury whatsoever caused by pet(s) and shall pay the landlord or applicable party for any damages or injury caused by the pet(s). I also realize that I should obtain liability insurance for pet ownership and that paying for the insurance is my responsibility.

I agree to accept full responsibility and will indemnify and hold harmless the landlord for any claims by or injuries to third parties or their property caused by my pet(s).

I agree to pay a non-refundable annual fee of \$_____ to cover some of the additional operating cost incurred by the MHB. I also understand that this fee is due and payable prior to the execution of this lease addendum and each twelve months thereafter.

I agree to pay a refundable pet deposit of \$_____ to the MHB. The annual fee and initial deposit must be paid prior to the execution of this lease addendum. The pet deposit may be used by the landlord at the termination of the lease toward payment of any rent or toward payment of any other costs made necessary because of resident's occupancy of the premises. Otherwise, the pet deposit, or any balance remaining after final inspection, will be returned to the resident after the premises are vacated and all keys have been returned.

I AGREE AND UNDERSTAND THAT ALL INFORMATION CONCERNING MY PET(S) MUST BE UPDATED ANNUALLY AND PROVIDED TO THE MHB AT THE ANNUAL REEXAMINATION. ANNUAL FEES SHALL BE PAYABLE IN FULL TWELVE MONTHS FROM THE APPROVAL DATE.

I AGREE AND UNDERSTAND THAT VIOLATING THIS LEASE ADDENDUM MAY RESULT IN THE REMOVAL OF THE PET(S) FROM THE PROPERTY OF THE MHB AND/OR EVICTION. I ALSO UNDERSTAND THAT I MAY NOT BE ALLOWED TO OWN ANY TYPE OF PET IN THE FUTURE WHILE BEING AN OCCUPANT OF THE MHB.

I ALSO UNDERSTAND THAT I MUST OBTAIN PRIOR APPROVAL FROM THE MHB BEFORE MAKING A CHANGE OF A PET FOR WHICH THIS POLICY WAS APPROVED OR ADDING A SECOND PET. ALSO, A PICTURE MAY BE TAKEN BY THE MHB STAFF OF THE PET(S) FOR DOCUMENTATION.

Head of Household Signature

Date

MHB Representative Signature

Date

Section I.

PET POLICY

II.

III.

IV. 1. Pet Ownership: A resident may own one or more common household pets or have one or more common household pets present in the dwelling unit of such resident, subject to the following conditions:

- A. Each Head of Household may own up to two pets. If one of the pets is a dog or cat, (or other four legged animal), the second pet must be contained in a cage or an aquarium for fish. Each bird or other animals, other than fish, shall be counted as one pet. For purposes of Housing Programs, domesticated animals such as dogs, cats, birds, rabbits, fish and turtles that are traditionally kept in the home for pleasure, rather than for commercial purposes, are considered as common household pets. Common household pets do not include reptiles (except turtles) or dangerous breeds of dogs such as Doberman Pinschers, Rottweilers, Bull Terriers, or any mixed breed dog with prominent characteristics of Pit Bulls or Rottweilers. Refer to Section I, Part 3 (Prohibited Animals). Acceptable turtles are Terrapin Box Turtles and Land Turtles. Snapper Turtles are unacceptable as common household pets.
- B. If the pet is a dog or cat, it must be neutered/spayed by the age of three (3) months, and cats must declawed by the age of three (3) months. The evidence can be provided by a statement/bill from a veterinarian and/or staff of the humane society. The evidence must be provided prior to the execution of this agreement and/or within 10 days of the pet becoming of the age to be neutered/spayed or declawed. Residents must provide waterproof and leak proof litter boxes for cat waste, which must be kept inside the dwelling unit. Cardboard boxes are not acceptable and will not be approved. The resident shall not permit refuse from litter boxes to accumulate nor to become unsightly or unsanitary. Also, the weight of a cat cannot exceed 10 pounds (fully grown) and a dog may not exceed 20 pounds in weight (fully grown). All other four-legged animals are limited to 10 pounds (fully grown).
- C. If the pet is a bird, it shall be housed in a birdcage and cannot be let out of the cage at any time. Birds should be no larger than a parakeet.
- D. If the pet is a fish, the aquarium must be twenty gallons or less, and the container must be placed in a safe location in the unit. The resident is limited to one container for the fish; however, there is no limit on the number of fish that can be maintained in the container as long as the container is maintained in a safe and nonhazardous manner. All fish must be nonpoisonous and not of a dangerous species, such as Guppies, Goldfish or Jack Dempshi.
- E. All dogs within the City limits of Prichard over three months old are required to be licensed. Proof of current rabies inoculation is required for all license purchases.

- F. If the pet is a cat or dog, it must have received rabies and distemper inoculations or boosters, as applicable. Evidence of inoculations can be provided by a statement/bill from the county rabies officer, his/her authorized representative or any duly licensed veterinarian and must be provided before the execution of this agreement. Dogs and cats more than 3 months of age are required to be vaccinated against rabies. Vaccinations against rabies are good for one year.
- G. All pets must be housed within the unit and no facilities can be constructed outside of the unit for any pet. No animal shall be permitted to be loose and if the pet is taken outside it must be taken outside on a leash and kept off other residents lawns. Also, all pets must wear collars with identification at all times. Pets without a collar will be picked up immediately and transported to the Prichard Animal Shelter or other appropriate facility.
- H. All authorized pet(s) must be under the control of an adult. An unleashed pet, or one tied to a fixed object, is not considered to be under the control of an adult. Pets which are unleashed, or leashed and unattended, on MHB property may be impounded and taken to the Prichard Animal Shelter. It shall be the responsibility of the resident to reclaim the pet at the expense of the resident. Also, if a member of the MHB staff has to take a pet to the Prichard Animal Shelter the resident will be charged \$50 to cover the expense of taking the pet(s) to the Prichard Animal Shelter.
- I. Pet(s) may not be left unattended for more than twenty-four consecutive hours. If it is reported to MHB staff that a pet(s) has been left unattended for more than a twenty-four (24) consecutive hour period, MHB staff may enter the unit and remove the pet and transfer the pet to the Prichard Animal Shelter. Any expense to remove and reclaim the pet from any facility will be the responsibility of the resident. In the case of an emergency, the MHB will work with the resident to allow more than 24 hours for the resident to make accommodations for the pet.
- J. Pet(s), as applicable, must be weighed by a veterinarian. A statement containing the weight of the pet must be provided to the MHB prior to the execution of this agreement and upon request by the MHB.

Note: Any pet that is not fully-grown will be weighed every six months. Also, any pet that exceeds the weight limit at any time during occupancy will not be an eligible pet and must be removed from MHB property.

- 2. Responsible Pet Ownership: Each pet must be maintained responsibly and in accordance with this pet ownership lease addendum and in accordance with all applicable ordinances, state and local public health, animal control, and animal anti-cruelty laws and regulations governing pet ownership. Any waste generated by a pet must be properly and promptly disposed of by the resident to avoid any unpleasant and unsanitary odor from being in the unit.

3. Prohibited Animals: Animals or breeds of animals that are considered by the MHB to be vicious and/or intimidating will not be allowed. Some examples that have a reputation of a vicious nature are: reptiles, Rottweilers, Doberman Pinschers, Pit Bulldogs and/or any animal that displays vicious behavior. This determination will be made by a MHB representative prior to the execution of this lease addendum.
4. Pet(s) shall not disturb, interfere or diminish the peaceful enjoyment of other residents. The terms, "disturb, interfere or diminish" shall include but not be limited to barking, howling, chirping, biting, scratching and other like activities. This includes any pets that make noise continuously and/or incessantly for a period of 10 minutes or intermittently for one-half hour or more and therefore disturbs any person at any time of the day or night. The Housing Manager will terminate this authorization if a pet disturbs other residents under this section of the lease addendum. The resident will be given one week to make other arrangements for the care of the pet or the dwelling lease will be terminated.
5. If the animal should become destructive, create a nuisance, represent a threat to the safety and security of other persons, or create a problem in the area of cleanliness and sanitation, the Housing Manager will notify the resident, in writing, that the animal must be removed from the public housing development, within 10 days of the date of the notice from the MHB. The resident may request a hearing, which will be handled according to the MHB's established grievance procedure. The pet may remain with the resident during the hearing process unless the MHB has determined that the pet may be a danger or threat to the safety and security of other persons. If this determination has been made by the MHB, the pet must be immediately removed from the unit upon receipt of the notice from the MHB.
6. The resident is solely responsible for cleaning up the waste of the pet within the dwelling unit and on the premises of the public housing development. If the pet is taken outside it must be on a leash at all times. If there is any visible waste by the pet it must be disposed of in a plastic bag, securely tied and placed in the garbage receptacle for their unit. If the MHB staff is required to clean any waste left by a pet, the resident will be charged \$25 for the removal of the waste.
7. The resident shall have pets restrained so that maintenance can be performed in the apartment. The resident shall, whenever an inspection or maintenance is scheduled, either be at home or shall have all animals restrained or caged. If a maintenance person enters an apartment where an animal is not restrained, maintenance shall not be performed, and the resident shall be charged a fee of \$25. In addition, the work order will be considered closed with a notation –

unrestrained pet (dog/cat). If this same situation again occurs, the pet shall be removed from the premises. Pets that are not caged or properly restrained may be impounded by animal control officers or by MHB staff and taken to the Prichard Animal Shelter. It shall be the responsibility of the resident to reclaim the pet at the expense of the resident. Also, if a member of the MHB staff takes a pet to the Prichard Animal Shelter the resident will be charged an additional \$50 to cover the expense of taking the pet(s) to the Prichard Animal Shelter. The MHB shall not be responsible if any animal escapes from the residence due to maintenance, inspections or other activities of the landlord.

8. Pets may not be bred or used for any commercial purposes.
9. Dog or cat owners must take care to walk their pets away from pedestrian areas.
10. Residents must post a "BEWARE OF DOG" sign at their front entrance.
11. When a pet causes physical injury of any kind to any person on the property, the MHB must be notified by the owner and the owner must remove the pet immediately. The owner must supply to the management office a notarized letter stating when the pet was removed and the location of the pet.
12. Pet owners are expected to exercise responsible and courteous behavior so that the presence of their pet on the property in no way violates the right of others to peaceful enjoyment of the premises. Dogs and cats must be obedient.
13. Visiting pets are not allowed at any time on MHB premises unless it is a Service Animal ("SEEING EYE" or "HEARING EAR")
14. The owner of a pet will be responsible for the disposal (and the cost incurred) of the animal's remains upon death, from whatever cause, and regardless of the location of the remains of the animal on MHB property. ANIMAL REMAINS SHALL BE DISPOSED OF:

By or through the Public Works Department
By or through a duly licensed veterinarian; or
By action of the Police Department
15. Owners of dogs and cats will be responsible for submitting annually to the management office (at recertification) proof of professional extermination for fleas, ticks or other animal related pests.
16. Residents will be subject to eviction after three (3) violations in one year. Note: depending on circumstances, an eviction may be warranted before 3 violations occur in a one-year time frame.

17. The resident must provide the name, address and phone number of one or more responsible parties who will care for the pet if the pet owner becomes incapacitated or dies.
18. The resident indemnifies and holds MHB harmless of and from any damage or loss due to the resident's pets, but not exempting any negligence of the MHB, however occasioned, and also against and from all claims, damages, suits and expenses by reason of injury to any party or property owned and managed by the MHB subject to the limitation imposed on exculpatory clauses under Federal Regulations and State Laws regarding the acts or omission of the MHB.

Section II. SCHEDULE OF ANNUAL FEES AND INITIAL DEPOSIT

FEE AND DEPOSIT SCHEDULE (An annual fee and deposit is required for each pet)

<u>Type of Pet</u>	<u>Fee</u>	<u>Deposit</u>
Dog	\$150	\$250
Cat	\$100	\$150
Fish Aquarium	\$50	\$100
Fish Bowl (requires no power and no larger than two gallons)	\$0	\$25
Caged Pets	\$100	\$150

Note: The above schedule is applicable for each pet; therefore, if a resident has more than one pet he or she must pay the applicable annual fee and deposit for each pet.

The entire annual fee and deposit (subject to the exception listed below) must be paid prior to the execution of the lease addendum. No pet shall be allowed in the unit prior to the completion of the terms of this pet policy.

The annual fee shall be paid at the time of reexamination each year and all proof of inoculations and other requirements shall be made available to the MHB at such time. The annual fee is not reimbursable. The deposit made shall be utilized to offset damages caused by the pet and/or resident. Any balance, if any, from the deposit will be refunded to the resident at the time of move-out or removal of the pet. THERE SHALL BE NO REFUND OF THE ANNUAL FEE.

It shall be a serious violation of the lease for any resident to have a pet without proper approval and without having complied with the terms of this policy. Such violation shall be considered to be a violation of Paragraph IV (L) of the lease (a serious violation) and the MHB will issue a termination notice. The resident will be entitled to a grievance hearing in accordance with the provisions of Paragraph 5 of this Pet Policy or the Grievance Procedure, as applicable.

MOBILE HOUSING BOARD
PET OWNERSHIP LEASE ADDENDUM
RESIDENT ACKNOWLEDGMENT

After reading and/or having read to me this lease addendum I, _____
(Print Name)

agree to the following:

I agree to abide by the requirements outlined in this lease addendum for pet ownership and to keep the pet(s) in accordance with this addendum.

I agree and understand that I am liable for any damage or injury whatsoever caused by pet(s) and shall pay the landlord or applicable party for any damages or injury caused by the pet(s). I also realize that I should obtain liability insurance for pet ownership and that paying for the insurance is my responsibility.

I agree to accept full responsibility and will indemnify and hold harmless the landlord for any claims by or injuries to third parties or their property caused by my pet(s).

I agree to pay a non-refundable annual fee of \$_____ to cover some of the additional operating cost incurred by the MHB. I also understand that this fee is due and payable prior to the execution of this lease addendum and each twelve months thereafter.

I agree to pay a refundable pet deposit of \$_____ to the MHB. The annual fee and initial deposit must be paid prior to the execution of this lease addendum. The pet deposit may be used by the landlord at the termination of the lease toward payment of any rent or toward payment of any other costs made necessary because of resident's occupancy of the premises. Otherwise, the pet deposit, or any balance remaining after final inspection, will be returned to the resident after the premises are vacated and all keys have been returned.

I AGREE AND UNDERSTAND THAT ALL INFORMATION CONCERNING MY PET(S) MUST BE UPDATED ANNUALLY AND PROVIDED TO THE MHB AT THE ANNUAL REEXAMINATION. ANNUAL FEES SHALL BE PAYABLE IN FULL TWELVE MONTHS FROM THE APPROVAL DATE.

I AGREE AND UNDERSTAND THAT VIOLATING THIS LEASE ADDENDUM MAY RESULT IN THE REMOVAL OF THE PET(S) FROM THE PROPERTY OF THE MHB AND/OR EVICTION. I ALSO UNDERSTAND THAT I MAY NOT BE ALLOWED TO OWN ANY TYPE OF PET IN THE FUTURE WHILE BEING AN OCCUPANT OF THE MHB.

I ALSO UNDERSTAND THAT I MUST OBTAIN PRIOR APPROVAL FROM THE MHB BEFORE MAKING A CHANGE OF A PET FOR WHICH THIS POLICY WAS APPROVED OR ADDING A SECOND PET. ALSO, A PICTURE MAY BE TAKEN BY THE MHB STAFF OF THE PET(S) FOR DOCUMENTATION.

Head of Household Signature

Date

MHB Representative Signature

Date

**Assessment of Site-Based Waiting List
Development Demographic Changes**

A study of the demographics of the Mobile Housing Board's sixteen public housing sites was done using historical and current MTCS data. The statistics reflect no marked changes in the racial, ethnic or disability-related tenant composition from the implementation of site-based waiting lists in May 1999 to present (October 31, 2000).

Resident Member of the PHA Governing Board

On January 18, 2000, Mayor Michael C. Dow swore in Ms. Ruby Lang, resident of Thomas James Homes, as a member of the Board of Commissioners of the Mobile Housing Board. She was sworn in for a five-year term, which expires August 31, 2004.

Ms. Lang was nominated for appointment to the Board of Commissioners by the City-Wide Resident Council whose recommendation for submission to the Mayor was approved by the Mobile Housing Board Commissioners.

Membership of the Resident Advisory Board

City Wide Residents' Council, Inc. Executive Board

Ruby Lang, President

Thomas James Homes

Glender Montgomery, Vice President

Josephine Allen Homes

William Knot, Treasurer

Frank Boykin Towers

Sharon Dunagan, Secretary

Josephine Allen Homes

A. F. Owens, Orange Grove, Jessie Thomas Homes

Hattie Pettway

R. V. Taylor Plaza Homes

Mamie Bell

Oaklawn Homes

Nettie King

Gulf Village Homes

Tiffany Nettles

Attachment J

Emerson Gardens

Brunetta Smith

**City Wide Residents' Council, Inc.
Executive Board**

Roger Williams Homes

Frances Blount

Central Plaza Towers

Mardia Hatcher

Section 8

Position Vacated by Betty Baker on May 31, 2000

Tenant Association Officers

Josephine Allen Tenants' Association Officers

Glender Montgomery, President

Tempie Burke, Vice President

Sharon Dunagan, Secretary

Bennie Payne, Treasurer

Position of Chaplain Vacant

Gulf Village Tenants' Association Officers

Tiffany Nettles, President

Jamillah Robinson, Vice President

Sharon Rambo, Secretary

Wanda Robinson, Treasurer

Brenda Yelding, Chaplain

Oaklawn Homes Tenants' Association Officers

Nettie King, President

Position of Vice President Vacant

Position of Secretary Vacant

Attachment J

Mary Packer, Treasurer

Tameika Pettway, Chaplain

**Orange Grove, Jessie Thomas and A. F. Owens Homes
Tenants' Association Officers**

Hattie Pettway, President

Emma Chestang, Vice President

Shaminita Overton, Secretary

Margaret Kennedy, Assistant Secretary

Tchenevia Ward

Annie Ike

R. V. Taylor Tenants' Association Officers

Mamie Belle, President

Wonnie Clyburn, Vice President

Lydia Rowe, Secretary

Prentez Johnson

Roger Williams Tenants' Association Officers

Frances Blount, President

Linda Rowser, Vice President

Dorothy Gayle, Treasurer

Adrian Oliver, Chaplain

Frank Boykin Towers

William Knott, President

Fringella Preston, Vice President

Daisy Duke, Secretary

Annie Davis, Treasurer

Jessie B. Waton, Chaplain

Emerson Gardens

Brunetta Smith, President

Ernestine Hopkins, Vice President

Anne Crawford, Secretary

Hannah Hunter, Treasurer

Matteal W. Coleman, Chaplain

Central Plaza Towers Tenants' Association Officers

Mardia Hatcher, President

Linda Windham, Vice President

Rosa McKeel, Secretary

Eolyn Woods, Treasurer

Thomas James Homes Tenants' Association Officers

Due to the separation of the R. V. Taylor Plaza and the Thomas James Homes Communities, election in the Thomas James Homes will take place November 14, 2000 in the Clinton Johnson Economic Development Center.

Follow-Up Plan for Safety

The Security Department of the Mobile Housing Board, in compliance with the directions from HUD, establishes a plan to increase the safety of all residents residing in Mobile Public Housing. The plan will address the shortcomings in safety and security, as identified by the residents of our communities. Therefore, in response to the Fiscal Year 1999 Resident Satisfaction Survey, in which the Mobile Housing Board received a score of 52.0% in safety, the following actions are planned and will be implemented:

- Mobile Housing Board to hire a new Security Coordinator.
- The Security Coordinator to meet with each resident council and discuss the security/safety issues in each community.
- New contracts with the Mobile Police departments are to be written to increase the amount of Community Oriented Policing that is practiced in each development.
- All assigned police officers will attend training on Enhanced Neighborhood Policing to empower them with knowledge and technique in developing Community Action Groups in each development.
- A new contract with the Mobile Sheriff's Department will allow the Mobile Housing Board to direct the type and amount of patrols and operations within the communities that are experiencing higher crime activity.
- The Security Coordinator will develop new specifications for the security contract that covers the two high-rise developments of Mobile Housing Board. These new specifications will ensure more of a presence of the security force.
- We will hire a new security officer that will allow the Mobile Housing Board to have contact that is more direct with the residents in dealing with safety and security needs.
- The Security Coordinator will propose a program to identify residents and their vehicles to improve the efforts of the police in limiting access to unwanted visitors within the public housing developments.
- The Mobile Housing Board will collaborate with the local Crimestoppers Organization to increase the awareness of the reward program that will keep the informant's identification secret. This will be done to remove the fears of the residents allowing them to become more involved in solving the problems in their communities.

Follow-Up Plan for Neighborhood Appearance

The Housing Management and Technical Service Departments of the Mobile Housing Board (MHB), in compliance with the directions from HUD, established a plan to improve the neighborhood appearance of the developments of the MHB. In response to the Fiscal Year 1999 Customer Service and Satisfaction Survey results, in which the MHB received a score of 59.1% in Neighborhood Appearance, the following actions are planned and will be implemented:

- MHB will decentralize Central Maintenance and assign maintenance personnel (including a Maintenance Supervisor) to each site.
- Maintenance Supervisors to assign personnel to address the policing of grounds on a daily basis.
- Utilize the Environmental Officer to inspect sites and issue citations for litter violations/debris and illegal parking.
- Provide additional equipment for all sites and Technical Services (2 vacuums, street sweepers and lawnmowers).
- Contract with resident-owned lawn care business to provide service at 5 sites.
- Schedule sites to receive bi-weekly/weekly mowing, edging and weed eating.
- Partner with the City of Mobile to utilize community workers to pick up litter at the sites (when available).
- Hire 'seasonal' staff to assist in grounds upkeep.
- Provide bulk service pick-up to all sites on a weekly basis.
- Partner with the City of Mobile Public Works Department for trash can pick-ups at R. V. Taylor Plaza.
- Emergency priority given to address securing vacant units.
- Removal of graffiti within 48 hours of reporting.
- Site Managers and Maintenance Supervisors to make daily assessments of properties and take corrective action to address problems immediately.
- Managers to educate residents on areas of responsibility in the lease pertaining to the upkeep of their yards (via letters, meetings, newsletters and orientation).
- Contract with Pest Control Company to treat all units and common areas no less than once annually and as requested by residents and staff thereafter.

